P2100000648

(Red	questor's Name)		
(Add	dress)		
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(City	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			





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2021 JAN -5 711 1: 15 JAN -5 AM 7: 48

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 01/05/2021		#WAL	.K
ENTITY NAME MICHAE	L SCHWARTZ STUDIO INC.		
DOCUMENT NUMBER			
	PLEASE FILE THE ATTACHED AND RETURN		
<u> </u>	Plain Copy Certified Copy Certificate of Status	i eg e	€ 4V°
P	LEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY		
	Certified Copy of Arts & Amendments Certificate of Good Standing		e i
	APOSTILLE' / NOTARIAL CERTIFICATION		
COUNTRY OF DESTINATI NUMBER OF CERTIFICAT	DNES REQUESTED	-	
TOTAL OWED \$70.00	ACCOUNT #: I20160000072		
Please call Tina at the	c above number for any issues or concerns. Thank you so m	uch!	

COVER LETTER

Department of State **New Filing Section** Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Michael Schwartz Studio Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

FROM: LEANA GUZMAN C/O ZENBUSINESS PBC Name (Printed or typed) 5900 BALCONES DR STE 5000 Address AUSTIN, TX 78731 City, State & Zip 844-493-6249 Davtime Telephone number fulfillment@zenbusiness.com E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporat	tion shall be: Michael Schwartz	Studio Ir	<u>1C.</u>
ARTICLE II PRINC	TIPAL OFFICE Principal street address ne		Mailing address, if different is:
Boca Raton, FL 3348	7	1 	
ARTICLE III PURPO The purpose for which t	OSE he corporation is organized is: Photog	raphy Se	rvices
			
ARTICLE IV SHAR! The number of shares of	ES stock is: 10000		
ARTICLE V INITIA	IL OFFICERS AND/OR DIRECTORS		
	Michael Schwartz-President	Name and Title	Michael Schwartz-Director
Address	17381 Springtree Lane	Address:	17381 Springtree Lane
	Boca Raton, FL 33487		Boca Raton, FL 33487
N 1777-1	Michael Schwartz-Treasurer	ki kani i	Michael Schwartz-Secretary
	17381 Springtree Lane		
r voure	Boca Raton, FL 33487	. Mulicos.	Boca Raton, FL 33487
			20
Name and Title:		Name and Title	2021 JAN
Address		Address:	
			8

Name and	Title:	_ Name and Title:	
Address		_ Address:	
		_	
		- -	
	REGISTERED AGENT		
The name and Flo	orida street address (P.O. Box NOT acceptable) o Michael Schwartz	t the registered agent	15:
Name:	 	_	
Address:	17381 Springtree Lane	-	
	Boca Raton, FL 33487	_	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The name and ad	dress of the Incorporator is:		
Name:	Michael Schwartz		
	17381 Springtree Lane	_	
Address:	Boca Raton, FL 33487	-	
	Boca Naton, 1 L 33407	_	
ARTICLE VIII	<u>EFFECTIVE DATE:</u>		
Effective date, if of	other than the date of filing:ate is listed, the date must be specific and cannot	. (OPT ot be more than five	IONAL) days prior or 90 days after the
	inserted in this block does not meet the applicable fective date on the Department of State's records.		irements, this date will not be listed as
	ed as registered agent to accept service of process f uniliar with and accept the appointment as register		
Is/ Michael S	chwartz		01.04. <u>2</u> 020
141	Required Signature/Registered Agent		Date
I submit this doci document to the D	iment and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware th y as provided for in s	at the false information submitted in a .817.155, F.S.
/s/ Michael Sc	hwartz		01.04.2020
Required Signatur	re/Incorporator		Date
			7
			; *