

P21000090120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

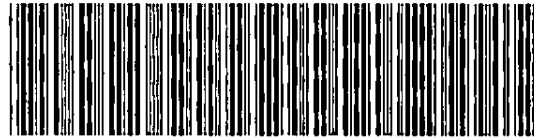
(Document Number)

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[Signature]
10/18/21

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COVER LETTER

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

SUBJECT: TRENDY BAGS, CORP.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: ALBERTO LADOS

Name (Printed or typed)

470 S PARK RD UNIT 308

Address

HOLLYWOOD, FL 33021

City, State & Zip

(305)631-6666

Daytime Telephone number

jrrlados@yahoo.com

E-mail address: (to be used for future annual report notification)

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

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SECRETARY OF STATE
TALLAHASSEE, FL 32314

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: TRENDY BAGS. CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address
470 S PARK RD UNIT 308
HOLLYWOOD, FL 33021

Mailing address, if different is:
470 S PARK RD UNIT 308
HOLLYWOOD, FL 33021

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: FIVE HUNDRED SHARES NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>ALBERTO LADOS, P</u>	Name and Title:	_____
Address	<u>470 S PARK RD UNIT 308</u> <u>HOLLYWOOD, FL 33021</u>	Address:	_____ _____

Name and Title:	<u>MARCELA M PARRILLA</u>	Name and Title:	_____
Address	<u>470 S PARK RD UNIT 308</u> <u>HOLLYWOOD, FL 33021</u>	Address:	_____ _____

Name and Title:	_____	Name and Title:	_____
Address	_____ _____ _____	Address:	_____ _____ _____

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SECRETARY OF STATE
TALLAHASSEE, FL

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: MARCELA M PARRILLA

Address: 470 S PARK RD UNIT 308

HOLLYWOOD, FL 33021

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ALBERTO LADOS

Address: 470 S PARK RD UNIT 308

HOLLYWOOD, FL 33021

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SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Marcela M. Parrilla
Required Signature/Registered Agent

10/01/2021
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Alberto Lados
Required Signature/Incorporator

10/01/2021
Date

ALBERTO LADOS
470 S PARK RD UNIT 308
HOLLYWOOD, FL 33135

October 1, 2021

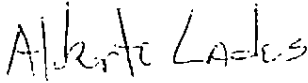
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: TRENDY BAGS, CORP

This letter is to advise you that the owner of **TRENDY BAGS, CORP.** Document NO. P14000098292 is the same owner of the enclosed articles of incorporation. We have dissolved the company on September 28, 2021 and have no intent of reopening it.

Thank you for your attention to this matter.

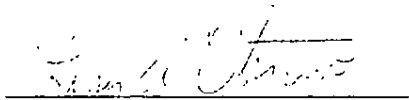
Sincerely yours,

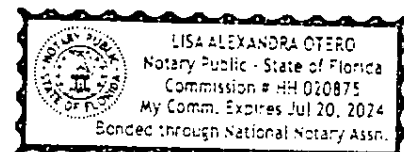


ALBERTO LADOS

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority appeared ALBERTO LADOS, who provided identification: FL driver's license and acknowledged that he executed the foregoing instrument for the purposes expressed therein.
WITNESS my hand and seal in the State and County aforesaid, this 1st day of October 2021.



Lisa Alexandra Otero
Notary Public
My Commission Expires: 07/20/2024

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SECRETARY OF STATE
TALLAHASSEE, FL