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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

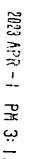
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TALLAHASSEE, FL





COVER LETTER

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

SUBJECT:	Mena Mossa Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDË SUFFIX)	-
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:	
☑ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO		
FROM:		e (Printed or typed)		
_	2431 Aloma Ave. Suite	124 Address	2023 APR -	و المارية
4.0	Winter Park, FL , 3279; City.	State & Zip	表 - 一	
	706 - 587 - 3986 Daytime T mena messa 2022@ gmail. E-mail address: (10 be use	com	3: 12 E. FL	

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)

he name of the corporal	INITIALITY OF THE	11.75		
RTICLE II PRINC				
Principal <u>street</u> address			Mailing address, if different is:	
2431 Alama Ave.		B	Barewood Lane	
<u> 5111te 124</u>		<u>Sanferd</u>	FL 32771	
Winter Park, FL	. 32792			
	he corporation is organized is: 259	3 all fament busin	283	
				
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Name and T	itle:	Name and Title:
Address		Address:
ADTICLE VI DE	EGISTERED AGENT	
The name and Flor	ida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Danielle White	
Address:	10202 Barewood lane	
-	Sarford FL 32771	•
<u>ARTICLE VII - IN</u>	SCORPORATOR	
		·
The name and add	ress of the Incorporator is:	
Name:	Danielle Multe	
Address:	12202 Barewood Lane	-
	Sanford FL 32771	-
ARTICLE VIII _ I	EFFECTIVE DATE:	ODMICALAL Y
(If an effective da	ther than the date of filing: $\frac{03 2^2 22}{22}$ te is listed, the date must be specific and cannot	t be more than five days prior or 90 days after the
filing.)	er e	Gline requirements this data will not be listed as
Note: If the date is the document's eff	ective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been name certificate, I am fai	d as registered agent to accept service of process fa miliar with and accept the appointment as register	or the above stated corporation at the place designated in this red agent and agree to act in this capacity
	11 7,01	03/21/22
l on	ille Whate Required Signature/Registered Agent	03/21/22 Date
I submit this docu		true. I am aware that the false information submitted in a
\sim		
Required Signature	The Hincorporator	Date 03/21/22

v.

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