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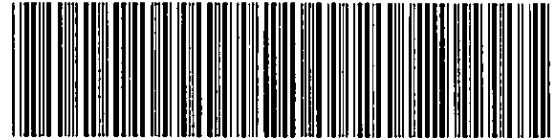
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Drooling Goddess, Inc.

(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: Jorge Arvelo

Name (Printed or typed)

6710 Main Street, Suite 233

Address

Miami Lakes, FL 33014

City, State & Zip

(786) 594-3944

Daytime Telephone number

jarvelo@numbersontime.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)

ARTICLE I NAME

The name of the corporation shall be: Drooling Goddess, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

201 SE 2nd Ave

Miami, FL 33131

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: sales and marketing of books and related products

ARTICLE IV SHARES

The number of shares of stock is: 100 common stocks at \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Isabella Nino - President

Name and Title: _____

Address 201 SE 2nd Ave

Address: _____

Miami, FL 33131

Name and Title: _____

Name and Title: _____

Address _____

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: Arvelo Accounting and Consulting Group

Address: 6710 Main Street, Suite 233

Miami Lakes, FL 33014

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Isabella Nino

Address: 201 SE 2nd Ave

Miami, FL 33131

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

Jorge Arvelo

Required Signature/Registered Agent

04/27/2022

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.

Isabella Nino

Required Signature/Incorporator

04/27/2022

Date

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