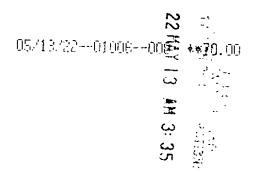
## P2200U035374

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





500387742335





## **COVER LETTER**

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

SUBJECT: <u>E</u> /	MERALD PRINTS (PROPOSED CORPORA	AND GRAPHI	X
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal 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  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED
FROM:	VIPUL PATEL Name	(Drinted on tuned)	
	905 THOMAS DR		
<u>P</u>	ANAMA CITY BE	ACH FL State & Zip	32408
- 6	848-203-92 Daytime T Catelgvipul@ E-mail address: (to be used		
#	E-mail address: (to be used	for future annual report i	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 1 NAN The name of the corpo	TE Diration shall be: EMELALD PL	INTS AND	GRAPHIX, INC.
ARTICLE II PRI 1169 JOH NICEVILLE	NCIPAL OFFICE Principal street address  NOTIFIC STATES OF THE STATES OF	2905 Pangun	ing address, if different is:  THOMAS DA  CITY GENACH FL 32408
ARTICLE III PUR The purpose for which	RPOSE th the corporation is organized is: MAKE	T- SMIRTS	AND SIGN SHOP
ARTICLE V INT	of stock is: 100 Con par vacu		0
Name and T Address	CANAMA CITY GEARM, FC		VYA PATEL-COD LI WATHEN BAJOU LN VANA CITY BENCH, FL 324
Name and Ti Address	110: SHAWN EVANS - UP 1159 MURFIELD W NICEVILLE FL 32578		22 MA
Name and Ti	tle:		
Address		Address:	

Name and Title:	Name and	Title:
Address	Address:	
		·
ARTICLE VI REGISTERI The name and Florida street	<u>ADAGENT</u> Address (P.O. Box NOT acceptable) of the registere	d agent is:
Name: VIPU	PATEL	
Address: <u>421</u>	WARKEN BAYOU LN	
PARM	WARKEN BAYOU LN NA CITY BEXEH, FC 324	<i>।</i> ०४
ARTICLE VII INCORPOR	<u>ATOR</u>	
The name and address of the	ncorporator is:	
Name:	PUL PATEL	
Address: 421	WALREN BAYOU LN	
PANA	WALREN BAYOU LN MA CITY BEACH, FC 3	32408
ARTICLE VIII EFFECTIVE Effective date, if other than the (If an effective date is listed, filling.)	EDATE: e date of filing: the date must be specific and cannot be more th	(OPTIONAL) han five days prior or 90 days after the
	nis block does not meet the applicable statutory fill on the Department of State's records.	ing requirements, this date will not be liste
	red agent to accept service of process for the above	
certificate, I am familiar with	and accept the appointment as registered agent and	
Rec	quired Signature/Registered Agent	$\frac{5/13/2027}{\text{Date}}$
I submit this document and a	ffirm that the facts stated herein are true. I am a f State constitutes a third degree felony as provided	
		«/13/2°22
Required Signature/Incorpora	or	Date 27
		7.7.8
		MAY 13 IN 3: 35
		بري ري