

P22 600064768

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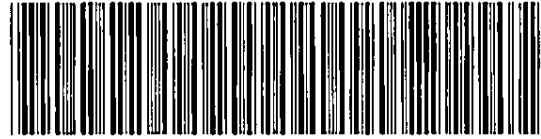
(Business Entity Name)

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S. CHATHAM  
AUG 19 2022

08/16/22--01001--019 \*\*70.00

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2022 AUG 16 PM 12:28  
ALL ABASSEE, NY



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 16, 2022

CORPORATE ACCESS, INC.

Corrected

SUBJECT: HANDCRAFTED INC  
Ref. Number: W22000105705

We have received your document for and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L12000034412.

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham  
Regulatory Specialist II  
New Filing Section

Letter Number: 622A00018294

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CORPORATE ACCESS, INC.  
2022 AUG 18 PM 3:57

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2022 AUG 18 AM 11:48  
ALLAHABAD, INDIA

**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: Handmade Inc,

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

13106 Bachara Way  
Jacksonville, FL 32218

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

Import / Export and sale of hand crafted items, such as purses and hammocks.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Leida Yaneth Suarez Vargas - President Name and Title: \_\_\_\_\_

Address 13106 Bachara Way Address: \_\_\_\_\_  
Jacksonville, FL 32218  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Diana Lorena Suarez Vargas - VP Name and Title: \_\_\_\_\_

Address 13106 Bachara Way Address: \_\_\_\_\_  
Jacksonville, FL 32218  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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: Diana Suarez

Address: 13106 Bachara Way  
Jacksonville, FL 32218

**ARTICLE VII INCORPORATOR**

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

Name: Leida Suarez

Address: 13106 Bachara Way  
Jacksonville, FL 32218

**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*

Diana Suarez

Required Signature/Registered Agent

8/15/2022

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.*

Leida Y. Suarez

Required Signature/Incorporator

8/15/2022

Date