

P23 000048701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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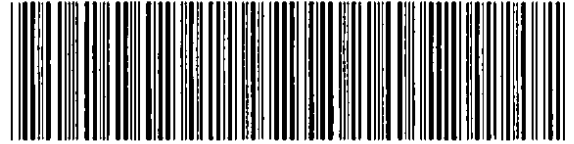
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: MEHGA 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
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 COPY REQUIRED

FROM: SHERENNA BARRETT
Name (Printed or typed)

11845 S.W. 216th Street
Address

Miami, Florida 33170
City, State & Zip

(786)317-9873
Daytime Telephone number

Bsherenna@gmail.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: MEHGA INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
11845 SW 216th Street
Miami, Florida 33170

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: All and any lawful business

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sherenna Barrett (President) Name and Title: _____

Address 11845 SW 216th Address: _____
Street Miami, Florida
33170

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: SHERENNA BARRETT
Address: 11845 S.W. 216th Street
Miami, Florida 33170

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SHERENNA BARRETT
Address: 11845 S.W. 216th Street
Miami, Florida 33170

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

Sherenna Barrett
Required Signature/Registered Agent

6-9-2023
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.

Sherenna Barrett
Required Signature/Incorporator

6-9-2023
Date

P23000048701

June 29, 2023

Division of Corporation
2415 N Monroe Street STE 810
Tallahassee, Florida 32303

RE: P19000023175

MEHGA INC.

To Whom it may concern,

As it relates to my business, MEHGA INC. that was located at 22125 South Dixie Highway, Miami Florida 33170. I have no intention of reinstating the dissolution and I authorize the use of the name for a new filing. I am releasing the name so that I can use it again in a new filing. The new filing paperwork is was already sent. Thank you for your assistance.

Sincerely,



Sherenna Barrett