## P24000032695

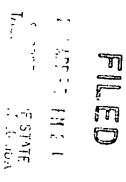
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer: (4) [0]			

Office Use Only

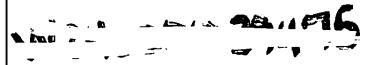


000423780420

02/12/24--01028--004 ++78.75



T.J.H 5/14/24



7.5.4



March 11, 2024

CARA FURMAN 602 SW 8TH ST FORT LAUDERDALE, FL 33315 US

SUBJECT: CARA EVE DESIGNS Ref. Number: W24000039475

We have received your document for CARA EVE DESIGNS and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tabitha J Howell Regulatory Specialist II

Letter Number: 524A00005265

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:	Eve Ocsigns Inc
ARTICLE II PRINCIPAL OFFICE  Brincipal street address  FORT LAUDER QUE, FL	Mailing address, if different is:
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Services	Art and design
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	ORS STATE
	Name and Title: President
Address 6025W8m5 Fort Lauderd	
33315	
	Name and Title: SCC TETQY
Address 602 SW 8th S Fort Lauderda	Address:
Fort Lauderda 33315	17, FL
Name and Title:	Name and Title:
Address	Address:
<u> </u>	

Name and Ti	itle:Nan	ne and Title:
Address	Ado	iress:
	GISTERED AGENT la street address (P.O. Box NOT acceptable) of the re	egistered agent is:
Name:	Cara Furman	
Address: _	602 SW 8th St	
<u>-</u>	Fort Laucerdale, FL33	315
ARTICLE VII IN	<u>CORPORATOR</u>	
The <u>name and addre</u>	ess of the Incorporator is:	
Name:	Coura Firman	
Address:	602 SW8m St	
	Fort Landerdale, FL	. 33315
filing.)  Note: If the date ins	e is listed, the date must be specific and cannot be a serted in this block does not meet the applicable statuctive date on the Department of State's records.	tory filing requirements, this date will not be listed as
	as registered agent to accept service of process for the iliar with and accept the appointment as registered ag	e above stated corporation at the place designated in thi ent and agree to act in this capacity
	ava Fun	12/24/23
	Required Signature/Registered Agent	Date
	ent and affirm that the facts stated herein are true. cartment of State constitutes a third degree felony as p	"I am aware that the false information submitted in a provided for in s.817.155, F.S.
Com	a Fan	12124123
Required Signature/	Incorporator	Date
		Date
•		