

P99000093707

Sunstate Research  
Requestor's Name

Address

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Magic Moments, Inc  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 OCT 25 PM 1:34

APPROVED  
AND  
FILED

- ☒ Walk in ☐ Pick up time \_\_\_\_\_ ☒ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |  |
|--------------------------|--|
| <input type="checkbox"/> | Amendment                              |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/> | Dissolution/Withdrawal                 |
| <input type="checkbox"/> | Merger                                 |

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-10/25/99--01069--006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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Examiner's Initials

ARTICLES OF INCORPORATION  
OF  
MAGIC MOMENTS. INC.

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TALLAHASSEE, FLORIDA

THE UNDERSIGNED SUBSCRIBER TO THESE ARTICLES OF INCORPORATION IS A  
NATURAL PERSON COMPETENT TO CONTRACT AND HEREBY FORMS A  
CORPORATION FOR PROFIT UNDER THE LAWS OF THE STATE OF FLORIDA

ARTICLE I- NAME

THE NAME OF THE CORPORATION IS MAGIC MOMENTS, INC.

ARTICLE II- NATURE OF BUSINESS

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED  
UNDER LAWS OF THE UNITED STATES OF AMERICA AND OF THIS STATE.

ARTICLE III- CAPITAL STOCK

THE MAXIMUM NUMBER OF SHARES OF STOCK THAT THIS CORPORAION IS  
AUTHORIZED TO HAVE OUTSTANDING AT ANY TIME IS SEVEN THOUSAND FIVE  
HUNDRED (7500) SHARES OF COMMON STOCK, EACH SHARE HAVING THE PAR  
VALUE OF ONE DOLLARS (\$1.00).

ARTICLE IV- INITIAL CAPITAL

THE AMOUNT OF CAPITAL WITH WHICH THIS CORPORATION SHALL BEGIN BUSINESS IS FIVE HUNDRED DOLLARS.

ARTICLE V- TERMS OF EXISTANCE

THIS CORPORATION SHALL HAVE PERPETUAL EXISTANCE.

ARTICLE VI- ADDRESS

THE INITIAL ADDRESS FO THE PRINCIPAL OFFICE OF THIS CORPORATION IS TO BE AT 506 NW 87<sup>TH</sup> AVE. #205, MIAMI, FL 33172-5759. THE BOARD OF DIRECOTRS MAY, FROM TIME TO TIME, DESIGNATES SUCH OTHER ADDRESS AND PLACE FOR THE PRINCIPAL OFFICE OF THIS CORPORATION AS IT MAY FIT.

ARTICLE VII- DIRECTORS

THE CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY; THE NUMBER OF DIRECTORD MAY BE INCREASE FROM TIME TO TIME BY THE BY-LAWS.

ARTICLE VIII- INITIAL DIRECTORS

NAME

ADDRESS

MICHELE M. MARTINEZ

506 NW 87<sup>TH</sup> AVE. #205  
MIAMI, FL 33172-5759

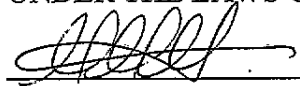
ARTICLE IX- SUBSCRIBER

THE NAME AND STREET ADDRESS OF THE SUBSCRIBER OF THESE ARTICLES OF CORPORATION, THE NUMBER OF SHARES OF STOCK SHE AGREES TO TAKE AND VALUE OF THE CONSIDERATION THEREOF IT AS FOLLOW:

| <u>NAME AND ADDRESS</u>  | <u>SHARES</u> | <u>CONSIDERATION</u> |
|--|---------------|----------------------|
| MICHELE M. MARTINEZ<br>506 NW 87 <sup>TH</sup> AVE, #205<br>MIAMI, FL 33172-5759 | \$7500        | \$500.00             |

THESE ARTICLES OF INCORPORATION MAY BE AMENDED IN THE MANNER PROVIDED BY LAW. EVERY AMENDMENT SHALL BE APPROVED BY THE BOARD OF DIRECTORS, PROPOSED BY THEM TO THE STOCKHOLDER, AND APPROVED AT THE STOCKHOLDER'S MEETING BY A MINORITY OF THE STOCK ENTITLED TO VOTE THEREON. UNLESS ALL THE DIRECTORS AND ALL STOCKHOLDERS SIGN A WRITTEN STATEMENT MANIFESTING THEIR INTENTION THAT A CERTAIN AMENDMENT OF THESE ARTICLES OF INCORPORATION BE MADE.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND SEAL,  
ACKNOWLEDGE AND FILED THE FOREGOING ARTICLES OF INCORPORATION  
UNDER THE LAWS OF THE STATE OF FLORIDA, THIS 19<sup>TH</sup> OF OCTOBER, 1999

  
\_\_\_\_\_  
MICHELE M. MARTINEZ (SEAL)

STATE OF FLORIDA  
DEPARTMENT OF STATE

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICES OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM  
PROCESS MAY BE SERVED AND NAMES AND ADDRESSES OF THE OFFICERS AND  
DIRECTORS.

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THE FOLLOWING IS SUBMITTED, IN COMPLIANCE WITH CHAPTER 48.091  
FLORIDA STATUTES:

MAGIC MOMENTS, INC.

A CORPORATION ORGANIZED (OR ORGANIZING) UNDER THE LAWS OF THE  
STATE OF FLORIDA WITH ITS PRINCIPAL OFFICE AT 506 NW 87<sup>TH</sup> AVE. #205 IN THE  
CITY OF MIAMI, COUNTY OF DADE, STATE OF FLORIDA, AS ITS AGENT TO  
ACCEPT SERVICES OF PROCESS WITHIN THIS STATE.

| OFFICERS:                  | TITLE        | SPECIFIC ADDRESS   |
|----------------------------|--------------|--|
| <u>MICHELE M. MARTINEZ</u> | <u>( P )</u> | 506 NW 87 <sup>TH</sup> AVE. #205,<br>MIAMI, FL 33172-5759 |
| <u>MICHELE M. MARTINEZ</u> | <u>( S )</u> | 506 NW 87 <sup>TH</sup> AVE. #205<br>MIAMI, FL 33172-5759  |

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TALLAHASSEE, FLORIDA

DIRECTORS

SPECIFIC ADDRESS

MICHELE M. MARTINEZ

506 NW 87<sup>TH</sup> AVE, #205, MIAMI, FL 33172-5759

ACCEPTANCE:

I AGREE AS RESIDENT AGENT TO ACCEPT SERVICES OF PROCESS: TO KEEP  
OFFICE OPEN DURING PRESCRIBED HOURS, TO POST MY NAME AND ANY OTHER  
OFFICER OF SAID CORPORATION AUTHORIZED TO ACCEPT PROCESS AT THE  
ABOVE FLORIDA DESIGNATED ADDRESS IN SOME CONSPICUOUS PLACE IN  
OFFICE AS REQUIRED BY LAW.

MICHELE M. MARTINEZ

  
RESIDENT AGENT

STATE OF FLORIDA } FLORIDA

} SS

COUNTY OF DADE } DADE

BEFORE ME PERSONALLY APPEARED MICHELE M. MARTINEZ, TO ME WELL  
KNOWN AND KNOWN TO ME TO BE THE INDIVIDUAL DESCRIBE IN AND WHO  
EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND  
ACKNOWLEDGE BEFORE ME THAT SHE EXECUTED THE SAME FOR THE PURPOSE  
THEREIN EXPRESSED.

WITNESS MY HAND AND OFFICIAL SEAL IN THE COUNTY AND STATE NAME

ABOVE THIS 19<sup>TH</sup> DAY OF OCTOBER, 1999



NOTARY PUBLIC  
STATE OF FLORIDA AT LARGE



CLARA E. FUMERO  
COMMISSION # CC 547801  
EXPIRES APR 16, 2000  
BONDED THRU  
ATLANTIC BONDING CO. INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
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