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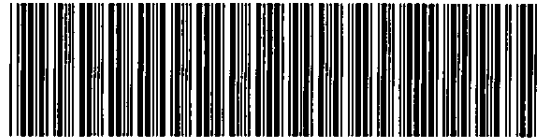
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2007 MAR 19 PM 1:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: ART & GLAMOUR DESIGNS, 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: Emily Ruiz

Name (Printed or typed)

11240 SW 236 Street

Address

Homestead, Fl. 33032

City, State & Zip

305-301-5124 or 786-395-2237

Daytime Telephone number

**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:

ART & GLAMOUR DESIGN, INC.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

11240 SW 236 Street, Homestead, Fl. 33032

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Sale of gift items and handmade jewelry

## **ARTICLE IV SHARES**

The number of shares of stock is:

100

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

List name(s), address(es) and specific title(s):

Emily Ruiz - Director / Madelin Grau - Director

## **ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Emily Ruiz - 11240 SW 236 Street, Homestead, Fl. 33032

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Madelin Grau - 12401 SW 124 Ct., Miami, FL. 33186

\*\*\*\*\*

*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*



\_\_\_\_\_  
Signature/Registered Agent



\_\_\_\_\_  
Signature/Incorporator

03-16-2007

\_\_\_\_\_  
Date

03-16-2007

\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA