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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Lalouse, Inc	, TE NAME – <u>MUST INCLUDE SUFFIX</u>)
(PROPOSED CORPORA	TË NAME – <u>MÜST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Erla Cadet	e (Printed or typed)
981 Hillcrest	
Hollywood, Fity,	-lorida 33021 State & Zip
_305-308-	2877 elephone number
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 NA The name of the corpor	ME ation shall be: Lalouse, Inc.	1			
	INCIPAL OFFICE				
98) Ho	Principal <u>street</u> address Hillcrest Court #314 Jupoud, Fl. 33021	- -		ng address, if	different is:
The purpose for which	the corporation is organized is:				SE Z
	business				FIL SECRETARY ALLAHASSE
The number of shares o	,	_			-ED 4 PN 2: 7.0F.STAT
Name and Title:_ Address:	TIAL OFFICERS AND/OR DIRECTOR Erla Codet 981 Hillcrest Court, #314 Hollywood, Fl. 33021		-		50
Name and Title:_ Address:					
Name and Title:_ Address:					
	GISTERED AGENT	_			
The <u>name and Florida</u> Name: Address:	street address (P.O. Box NOT acceptable) of Erla Coviet 971 Hillcrest Court #314 Hollywood, Fl. 33001	the regis - -	tered agent is:		
ARTICLE VII INC The name and address Name: Address:	corporator of the Incorporator is: Erla Codet All Hillcrest Court, #314 Hollywood, Fl. 33021	- -			
Having been named as this certificate() am fan	registered agent to accept service of process nittar with and accept the appointment as regi	for the stered ag	above stated co gent and agree	orporation at to act in this	the place designated in capacity
x Mill	Magy				0-28-10
•	Required Signature/Registered Agent				Date
I submit this document document to the Depart	t and affirm that the facts stated herein are i ment of State constitutes pythird degree felony	true. I a as provi	m aware that ided for in s.81	the false info 7.155, F.S.	ormation submitted in a
× Mll	Cla Clar				10-28-10
	Required Signature/Incorporator				Date