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COVER LETTER

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

SUBJECT: Sensacio	on Fashion Corp.		
	(PROPOSED CORPOR,	NTE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
S70.00 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:	net Aballe Romero	e (Printed or typed)	
652	E 4th AVE		
		Address	
Hial	eah, Florida 33010		
	City.	State & Zip	
305-	-570-5049		
	Daytime 1	elephone number	
yane	thaby71@yahoo.es		

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

CLE II PRIN	<u>CIPAL OFFICE</u>			
Principal street address 00 W 3rd AVE		Mailing ad 652 E 4th AVE	Mailing address, if different is: 652 E 4th AVE	
alcah, Florida 33012		Hialeah, Florida 33	010	

ICLE III PURF purpose for which	the corporation is organized is:	Store		
merene en a	nee			
ICLE IV SHAL	RES One of stock is:			
number of shares o	of stock is:			
number of shares of	AL OFFICERS AND/OR DIRECTORS			
number of shares of	AL OFFICERS AND/OR DIRECTORS le: Yanet Aballe Romero, President	Name and Title:		
number of shares of	AL OFFICERS AND/OR DIRECTORS Yanet Aballe Romero, President 4490 W 3rd AVE	Name and Title:		
number of shares of shares of shares of shares of the share and Tite share and Tite share of the shares of	AL OFFICERS AND/OR DIRECTORS Yanet Aballe Romero, President 4490 W 3rd AVE	Name and Title:		
number of shares of shares of shares of shares of the share and Tite share and Tite share of the shares of	AL OFFICERS AND/OR DIRECTORS Yanet Aballe Romero, President 4490 W 3rd AVE	Name and Title:		
number of shares of the shares of the share and Tit Address	AL OFFICERS AND/OR DIRECTORS Yanet Aballe Romero, President 4490 W 3rd AVE	Name and Title: Address:		
number of shares of the shares of the share and Tit Address	AL OFFICERS AND/OR DIRECTORS Vanet Aballe Romero, President 4490 W 3rd AVE Hialeah, Florida 33012	Name and Title: Address: Name and Title:		
Name and Tit Name and Tit	MAL OFFICERS AND/OR DIRECTORS Yanet Aballe Romero, President 4490 W 3rd AVE Hialeah, Florida 33012	Name and Title: Address: Name and Title: Address:		
Name and Tit Name and Tit	MAL OFFICERS AND/OR DIRECTORS Yanet Aballe Romero, President 4490 W 3rd AVE Hialeah, Florida 33012	Name and Title: Address: Name and Title: Address:		
Name and Tit Name and Tit	MAL OFFICERS AND/OR DIRECTORS Yanet Aballe Romero, President 4490 W 3rd AVE Hialeah, Florida 33012	Name and Title: Address: Name and Title: Address:	2018 F & 13	
Name and Tit Address Address	MAL OFFICERS AND/OR DIRECTORS Yanet Aballe Romero, President 4490 W 3rd AVE Hialeah, Florida 33012	Name and Title: Address: Name and Title: Address: Address:		
Name and Tit Address Address	MAL OFFICERS AND/OR DIRECTORS Yanet Aballe Romero, President 4490 W 3rd AVE Hialeah, Florida 33012	Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:		

Name a	nd Title:	Name and Title:
Addres	SS	Address:
	REGISTERED AGENT	
The <u>name and l</u>	Florida street address (P.O. Box NOT acceptable) of Yanet Aballe Romero	of the registered agent is:
Name:		_
Address:	4490 W 3rd AVE	_
	Hialeah, Florida 33012	_
ARTICLE VII	<u>INCORPORATOR</u>	
The <u>name and a</u>	address of the Incorporator is:	
Name:	Yanet Aballe Romero	
Address:	4490 W 3rd AVE	_
	Hialeah, Florida 33012	_
ARTICLE VIII	EFFECTIVE DATE: 11/07/2018	
Effective date, i (If an effective	f other than the date of filing:	. (OPTIONAL) ot be more than five days prior or 90 days after the
filing.)		
Note: If the dat the document's	e inserted in this block does not meet the applicable effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as
Having been na this certificate, I	med as registered agent to accept service of proces am familiar with and accept the appointment as re	ss for the above stated corporation at the place designated i gistered agent and agree to act in this capacity
	WI	11/07/2018
	Required Signature/Registered Agent	Date
I submit this do document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felor	true. I am aware that the false information submitted in my as provided for in s.817.155, F.S.
,	NA	11/07/2018
Requ	nired Signature/Incorporator	Date

COVER LETTER

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

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	(PROPOSED CORPOR	RATE NAME - MUST INCL	UDE SUFFIX)	
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		ADDITIONAL CO	PPY REQUIRED	
FROM: _		ne (Printed or typed)		
652 —	E 4th AVE			
	Address			
Hial	eah, Florida 33010			
	City	, State & Zip		
305-	570-5049			
	Daytime 1	Telephone number		
yane	tbaby71@yahoo.es			
	E-mail address: (to be use	d for future annual report no	otification)	

NOTE: Please provide the original and one copy of the articles.