

PO 7000085868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

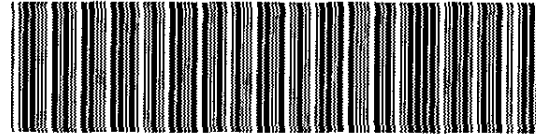
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*PR*

**COVER LETTER**

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

**SUBJECT: Chef de femme, 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: Kathleen Gutierrez**

Name (Printed or typed)

**4617 12th Avenue SE**

Address

**Naples, FL 34117**

City, State & Zip

**239-348-8416**

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:

Chef de femme, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

4617 12th Avenue SE  
Naples, Fl 34117

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

For Profit Sales, Products and Services

**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):

Kathleen Gutierrez, 4617 12th Avenue SE, Naples, FL 34117, President  
Raul Gutierrez, 4617 12th Avenue SE, Naples, FL 34117, Vice President

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**ARTICLE VI REGISTERED AGENT**

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


Kathleen Gutierrez 4617 12th Avenue SE, Naples FL 34117

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Kathleen Gutierrez 4617 12th Avenue SE, Naples FL 34117

\*\*\*\*\*  
*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

7/25/07  
Date

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

7/25/07  
Date