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\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

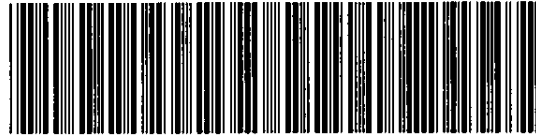
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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EFFECTIVE DATE

Jan 1, 2016

## COVER LETTER

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

SUBJECT: Beautifully Unique  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: Aisha Saunders  
Name (Printed or typed)  
2503 Sir Williams St  
Address  
Tallahassee, FL 32310  
City, State & Zip  
8505901098  
Daytime Telephone number  
aishamango@gmail.com  
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 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Beautifully Unique, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2503 Sir Williams Street  
Tallahassee, FL 32310

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to empower young  
women.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

by vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Aisha Saunders, CEO/president

Name and Title:

Address:

2503 Sir Williams

Address:

St.

Tallahassee, FL 32310

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name:

Aisha Saunders

Address:

2503 Sir Williams St.

Tallahassee, FL 32310

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name:

Aisha Saunders

Address:

2503 Sir Williams St.

Tallahassee, FL 32310

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 1/1/2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Aisha Saunders

Required Signature of Registered Agent

12/28/15

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Aisha Saunders

Required Signature of Incorporator

12/28/15

Date

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TALLAHASSEE, FL 32310

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APPROVED  
FILED