P01000048202

TRANSMITTAL LETTER

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

FROM:

	SSEE, FLORIDA	L MI 10: 26	目	
r ched	ck		=	
41:	91,2 ;	<u>3</u> 4 ₹	2	

SUBJECT: <u>C. LOU DESIGNER'S PLACE, INC.</u>

(proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check for $\frac{1}{70.00}$.

CARLOS LOU

Name (printed or typed)

10911 NE 2 AVE

Address

MIAMI FL 33161

City, State, & Zip

(305) 754-6690

Telephone Number

Note: Please provide the original and one copy of the Articles.

ARTICLES OF INCORPORATION

<u>OF</u>

C. LOU DESIGNER'S PLACE, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

C. LOU DESIGNER'S PLACE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

14682 NW 26 AVE OPA LOCKA FL 33161

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CARLOS LOU 10911 NE 2 AVE MIAMI FL 33161 OI MAY ILL AN IO: 26
SECRETARY OF STATE
SECRETARY OF STATE

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

CARLOS LOU 10911 NE 2 AVE MIAMI FL 33161

Articles of Incorporation Filing Fee - \$35

Signature

REGISTERED AGENT/REGISTERED OFFICE

CERTIFICATE OF DESIGNATION

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1.	The name of the corporation is: C. LOU DESIGNER'S PLACE, INC.	~		-
2.	The name and address of the registered agent and office is:	÷		
	CARLOS LOU			
	(NAME)	5 0	0	
	10911 NE 2 AVE		OI MAY II	
	(P.O. BOX <u>NOT</u> ACCEPTABLE)	HISSE ATHU	=	
	MIAMI FL 33161	OF ST	AH 10: 2	=======================================
	(CITY/STATE/ZIP)		N	

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE