

*Polina 92266*

**LAZARUS CORPORATE FILING SERVICE**

(Requestor's Name)  
 3320 S.W. 87 AVENUE  
 (Address)  
 MIAMI, FLORIDA (305)552-5973  
 (City, State, Zip) (Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

300004602443--3  
 -09/20/01--01027-016  
 \*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. D'VILLA FASHIONS, INC.  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

- ☒ Walk in   
 ☒ Pick up time 2:00   
 ☐ Certified Copy  
☐ Mail out   
 ☐ Will wait   
 ☐ Photocopy   
 ☐ Certificate of Status

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 01 SEP 20 PM 1:17  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/QUALIFICATION          |                     |
|-------------------------------------|---------------------|
| <input checked="" type="checkbox"/> | Foreign             |
| <input checked="" type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/>            | Reinstatement       |
| <input type="checkbox"/>            | Trademark           |
| <input type="checkbox"/>            | Other               |

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 01 SEP 20 AM 10:53  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

Examiner's Initials

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION  
OF

D'VILLA FASHIONS, INC.  
230 WEST 23 STREET  
HIALEAH, FL 33010

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida...

ARTICLE I

The name of this corporation shall be:

D'VILLA FASHIONS, INC..

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

### ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business...
- (2) Said corporation shall further have powers:

To have perpetual succession by its corporate name;

### ARTICLE IV

The amount of capital with which this corporation shall begin business is FIVE HUNDRED DOLLARS (\$ 500.00) DOLLARS.

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 500 shares, having an individual par value of \$ 1.00-----

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

HERMINIA VILLA  
205 TOTOCHEE DR.  
HIALEAH, FL 33010

ARTICLE VI

The initial Board of Directors shall consist of a total of 2 person(s), and the name(s) and address of the person(s) who is to serve as an initial director is:

HERMINIA VILLA  
205 TOTOLOCHEE DRIVE  
HIALEAH, FL 33010

EVELIO J VILLA  
299 EAST 13 STREET  
HIALEAH, FL 33010

The names who shall hold office until their successors are elected or appointed or have qualified are:

|                           |     |
|---------------------------|-----|
| PRESIDENT: HERMINIA VILLA | 60% |
| SECRETARY: EVELIO J VILLA | 40% |

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 17TH DAY OF Sept OF 2001.

Herminia Villa  
x Evelio J Villa

STATE OF FLORIDA     )  
                              ) SS.  
COUNTY OF DADE     )

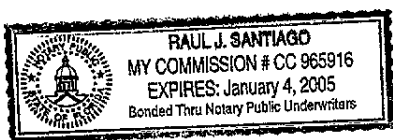
BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally appeared HERMINIA VILLA & EVELIO J VILLA known to me and known by me to be the person(s) who executed the foregoing Articles of Incorporation, and he (they) acknowledge before me that he (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this 17 day of Sept OF 2001.

Raul J. Santiago  
NOTARY PUBLIC, STATE OF FLORIDA  
AT LARGE

My Commission Expires:

**RAUL J. SANTIAGO**



CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

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: D'VILLA FASHIONS, INC.
2. The name and address of the registered agent and office is:

HERMINIA VILLA  
(NAME)

205 TOTOLOCHEE DR.

— (P.O. BOX NOT ACCEPTABLE)

HIALEAH, FL 33010

(CITY/STATE/ZIP)

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

*X Herminia Villa*

DATE

*9/17/01*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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