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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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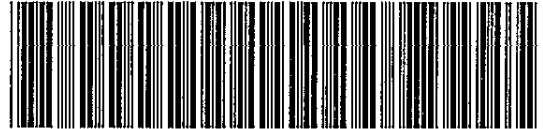
(Business Entity Name)

(Document Number)

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02 DEC - 2 PM 2: 26  
DIVISION OF CORPORATION

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**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Privilege Boutique, Inc.*

- Art of Inc. File \_\_\_\_\_
- LTD Partnership File \_\_\_\_\_
- Foreign Corp. File \_\_\_\_\_
- L.C. File \_\_\_\_\_
- Fictitious Name File \_\_\_\_\_
- Trade/Service Mark \_\_\_\_\_
- Merger File \_\_\_\_\_
- Art. of Amend. File \_\_\_\_\_
- RA Resignation \_\_\_\_\_
- Dissolution / Withdrawal \_\_\_\_\_
- Annual Report / Reinstatement \_\_\_\_\_
- Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- Certificate of Good Standing \_\_\_\_\_
- Certificate of Status \_\_\_\_\_
- Certificate of Fictitious Name \_\_\_\_\_
- Corp Record Search \_\_\_\_\_
- Officer Search \_\_\_\_\_
- Fictitious Search \_\_\_\_\_
- Fictitious Owner Search \_\_\_\_\_
- Vehicle Search \_\_\_\_\_
- Driving Record \_\_\_\_\_
- UCC 1 or 3 File \_\_\_\_\_
- UCC 11 Search \_\_\_\_\_
- UCC 11 Retrieval \_\_\_\_\_
- Courier \_\_\_\_\_

Signature \_\_\_\_\_

Requested by: \_\_\_\_\_

*SK* \_\_\_\_\_ *12/2/02* \_\_\_\_\_ *10:27* \_\_\_\_\_  
Name Date Time

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

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DIVISION OF CORPORATIONS  
02 DEC -2 PM 12:18

**ARTICLES OF INCORPORATION  
OF  
PRIVILEGE BOUTIQUE INC.**

**THE UNDERSIGNED SUBSCRIBER (s) TO THESE ARTICLES OF INCORPORATION, NATURAL PERSON (s) COMPETENT TO CONTRACT, HEREBY FORM A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA.**

**ARTICLE 1 - CORPORATE NAME**

**THE NAME OF THE CORPORATE IS:  
PRIVILEGE BOUTIQUE INC.**

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**ARTICLE II - DURATION**

**THIS CORPORATION SHALL EXIST PERPETUALLY UNLESS DISSOLVED ACCORDING TO FLORIDA LAW.**

**ARTICLE III - PURPOSE**

**THE CORPORATION IS ORGANIZED FOR THE PURPOSE OF ENGAGING IN ANY ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.**

**ARTICLE IV - CAPITAL STOCK**

**THE CORPORATION IS AUTHORIZED TO ISSUE (five hundred) SHARES ( 500 ) OF (one) DOLLAR (s) ( \$ 1.00 ) PAR VALUE COMMON STOCK, WHICH SHALL BE DESIGNATED "COMMON STOCK".**

**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT**

**THE NAME AND ADDRESS OR THE INITIAL REGISTERED AGENT OF THIS CORPORATION IS:**

**NAME:** BLEYETTE DUMOND \_\_\_\_\_

**PRINCIPLE MAILING AND ADDRESS:** 7040 B. N.W. 2<sup>nd</sup>. AVE. \_\_\_\_\_

**CITY:** MIAMI \_\_\_\_\_, FLORIDA \_\_\_\_\_ **ZIP** 333150

**ARTICLE VI- INITIAL BOARD OF DIRECTORS**

**THIS CORPORATION SHALL HAVE** ONE (1) **DIRECTORS INITIALLY. THE NUMBER OF DIRECTORS MAY BE INCREASED OR DIMINISHED FROM TIME TO TIME BY THE BY-LAWS, BUT SHALL NEVER BE LESS THAN ONE (1). THE NAMES AND ADDRESS OF THE INITIAL DIRECTOR(S) OF THE CORPORATION ARE AS FOLLOWS:**

**NAME:** BLEYETTE DUMOND \_\_\_\_\_

**PRINCIPLE AND MAILING ADDRESS:** 7040 B N.W. 2<sup>nd</sup>. AVE.

**CITY:** MIAMI \_\_\_\_\_, FLORIDA \_\_\_\_\_ **ZIP** 33150

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_, FLORIDA \_\_\_\_\_ **ZIP** \_\_\_\_\_

**ARTICLE VII - INCORPORATORS**

**THE NAME AND ADDRESSES OF THE PERSON(S) SIGNING THESE ARTICLES OF INCORPORATION ARE AS FOLLOWS:**

**NAME:** BLEYETTE DUMOND \_\_\_\_\_

**PRINCIPLE AND MAILING ADDRESS:** 7040 B N.W. 2<sup>nd</sup>. AVE. \_\_\_\_\_

**CITY:** MIAMI \_\_\_\_\_, FLORIDA \_\_\_\_\_ **ZIP** 33150

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_, FLORIDA \_\_\_\_\_ **ZIP** \_\_\_\_\_

**CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT**

**CERTIFICATE OF REGISTERED AGENT**

**OF**

**PRIVILEGE BOUTIQUE INC.**

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*(name of corporation)*

**PURSUANT TO FLORIDA STATUE SECTIONS 48.091 AND 607.304, THE FOLLOWING SUBMITTED:**

**THE ABOVE CORPORTATION, DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS REGISTERED OFFICE AS INDICATED IN THE ARTICLES OF INCORPORATION**

**AT : 7040 B. N.W. 2<sup>nd</sup>. AVE.  
MIAMI, FL. 33150  
PRINCIPLE AND MAILING ADDRESS**

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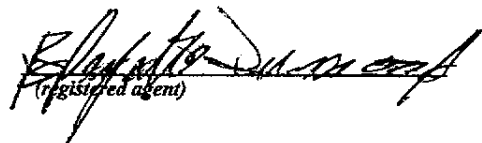
**HAS NAMED : BLEYETTE DUMOND**

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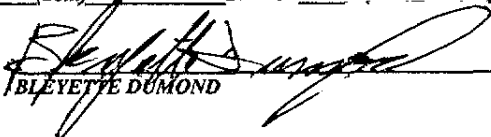
**LOCATED AT THE AFORESAID ADDRESS, AS ITS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.**

**ACKNOWLEDGEMENT**

**HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO COMPLY WITH THE PROVISIONS OF FLORIDA LAW IN KEEPING OPEN SAID OFFICE. I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS A REGISTERED AGENT.**

  
*(registered agent)*

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBER (S) HAVE EXECUTED THESE ARTICLES OF INCORPORATION THIS TWENTY SIXTH (26th) DAY OF NOVEMBER 2002

  
BLEYETTE DUMOND (SEAL)

\_\_\_\_\_  
(SEAL)

\_\_\_\_\_  
(SEAL)

STATE OF FLORIDA )

SS

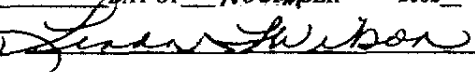
COUNTY OF DADE

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE ACKNOWLEDGEMENTS IN THE STATE AND COUNTY SET FORTH ABOVE PERSONALLY APPEARED

BLEYETTE DUMOND \_\_\_\_\_

KNOWN TO ME AND KNOWN TO BE THE PERSON (S) WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND WHO ACKNOWLEDGE BEFORE ME THAT (SHE) BLEYETTE DUMOND EXECUTED THESE ARTICLES OF INCORPORATION

IN WITNESS WHEREOF, I HAVE HEREUNTO AFFIXED MY HAND AND SEAL, IN THE STATE AND COUNTY AFORESAID THIS, TWENTY EIGHTH (28th) DAY OF NOVEMBER 2002

(NOTARY SEAL) 

(NOTARY PUBLIC, STATE OF FLORIDA AT LARGE)

LINDA L. WILSON

MY COMMISSION # CC987703

MY COMMISSION EXPIRES: DECEMBER 17, 2004



Linda L. Wilson  
MY COMMISSION # CC987703 EXPIRES  
December 17, 2004  
BONDED THRU TROY FAIR INSURANCE, INC