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TRANSMITTAL LETTER

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

SUBJECT: LUC	KILADY, INC. (PROPOSED CORPORA	te name – <u>Must Inclu</u>	DE SUFFIX)
Enclosed is an original	and one(1) copy of the arti	cles 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 CO	
FROM		E OF COMMUTIVE rinled or typed) PLACE SUITE #2 Address	
	MIAMI, FLORID; City,	A 33167 State & Zip	<u>.</u>
·	(305) 953- Daytime T	~5443 elephone 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:

LUCKILADY, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

12015 NW 21st PLACE, SUITE #2 MIAMI, FLORIDA 33167

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

AFROCENTRIC TEXTILE ART, PILLOWS, WALL HANGINGS, KEEPSAKES, NOVELTIES AND OTHER LAWFUL BUSINESS SERVICES.

ARTICLE IV SHARES

The number of shares of stock is:

20 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

EFUNDELE, Ofunmuyiwa 12015 NW 21st PLACE, SUITE #2 MIAMI, FLORIDA 33167 PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

EFUNDELE, Ofunmuliwa 12015 NW 21st PLACE, SUITE #2 MIAMI, FLORIDA 33167

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

I EFUNDELE, Ofunmuyiwa 12015 NW 21st PLACE, SUITE #2 MIAMI, FLORIDA 33167

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

Signature/Incorporator