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TRANSMITTAL LETTER

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

SUBJECT: SU	UCUSS EMPORIUM	OF SOUTH FLOO	RIDA CORP.	
	(PROPOSED CORPORA?	re name – <u>Must Incl</u> i	<u>ude suffix</u>)	
\$70.00 Filing Fee	☼ \$78.75Filing Fee& Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status	
FROM:	ISABEL CHAUCA Name (Printed or typed)			
10960 SW 15th ST #112				
·	A	Address		
PEMBROKE PINES, FL 33025 City, State & Zip				
		_		
(954) S38-9172 Daytime Telephope 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:

SUNGLASS EMPORIUM OF SOUTH FLORIDA CORP.



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EALL SEASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11401 PINES BOUTEVARD

PEMBRUKE PILES, FL 33026

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

ONE THOUSAND SHORES OF STOCK WITH A VALUE OF \$1.00 (ONE COLLAR) EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ISABEL CHAUCA, PRESIDENT

10960 SW 15th ST # 112

PEMBROKE PINES, FL 33025

ARTICLE VI REGISTERED AGENT

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

ISABEL CHAUCA

10960 SW 15th ST \$112

PEMBROKE PINES, FL 33025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ISABEL CHAUCA

10960 SW 15th ST #112

PEMBROKE PINES, FL 33025

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

L'hanca Te	
Signature/Registered Agent	Date
Olianca R	
Signature/Incorporator	Date