P0400004864/

(Re	equestor's Name)	
(Ac	idress)	
(Ac	(dress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nar	ne)
(Do	ocument Number)	
Pertified Copies Certificates of Status		
Special Instructions to Filing Officer:		



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SECRE TARY OF STATE FALLAHASSEK, FLORIDA

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3/18/

TRANSMITTAL LETTER

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

SUBJECT: F	RENCH CONNEC (PROPOSED CORPORAT	TIONS	INC
	(PROPOSED CORPORAT	ENAME – <u>MUST INCL</u> I	DE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	a check for:
\$70.00 Filing Fee	S \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	CLAUDE SALLE	Printed or typed)	
	2401 COLLINS	AVE N 15	510
	MIAMI BEAGING	CH 33 140 State & Zip	
		95 12 11	

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

RECEIVED

04 MAR 17 PM 2: 48

REPARTMENT OF STATE RIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

January 13, 2004

CLAUDE SALLE 2401 COLLINS AVE. #1510 MIAMI BEACH, FL 33140

SUBJECT: FRENCH CONNECTIONS INC.

Ref. Number: W0400001610

We have received your document for FRENCH CONNECTIONS INC.. However, the document has not been filed and is being returned for the following:

You must list at least one incorporator with a complete business street address.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L01000015909.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Letter Number: 904A00002324

Loria Poole Document Specialist New Filings Section

Division of the property of th

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
TARTICLE I NAME .
The name of the corporation shall be:
• •
ARTICLE II PRINCIPAL OFFICE
The principal place of business/maining address is:
2401 COLLINS AUBNUE \$ 1510, MIAMI BEACH 33140 - F
ARTICLE III PURPOSE
The purpose for which the corporation is organized is: PROFE SSIONAL CORPORATION
INTERNET STORE TO SELL EPICURE FOOD AND IMPORTED
GOODS ON THE WEB AND TO HOVERTISE SERVICES.
ARTICLE IV SHARES The number of shares of stock is:
ONE THOUSAND (1,000)
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):
CLAUDE SALLE
2401 COLLINS AVENUE * 1510
MINTI BEACH 33140 - FL
ARTICLE VI REGISTERED AGENT
The name and Florida street address of the registered agent is:
CLAVOB SALLE
2401 COLLINS AVE \$ 1510 MANI BEACH 33140
ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
: CLAUDE SALLE
2699 COLLINS AVENUE \$ 131
2699 COLLINS AVENUE \$ 131 THATH BEACH 33140 FL
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
Mill CLAUDE SALLE 01/6/04
Signature/Registered Agent Date
Signature/Registered Agent O1/6/04 Date O1/5/04 Signature/Incorporator Date
Signature/Incorporator Date