P050000035788

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)				
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)			
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status				
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status				
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)			
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(nddress)			
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status				
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)			
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL			
(Document Number) Certified Copies Certificates of Status				
(Document Number) Certified Copies Certificates of Status	(Business Entity Name)			
Certified Copies Certificates of Status	(Eddinoso Elisis) Namey			
Certified Copies Certificates of Status				
	(Document Number)			
Special Instructions to Filing Officer:	Certified Copies Certificates of Status			
Special Instructions to Filing Officer:				
Special Instructions to Filing Officer:				
	Special Instructions to Filing Officer:			
ı				



02/10/05--01028--017 **87.50

05 FEB I O FH 2: 45

Office Use Only

BWL 2/18/05

TRANSMITTAL LETTER

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

SUBJECT: ALURE MODELING INC					
	(PROPOSED CORPORA)	e name — <u>Must Incl</u>	OD ASUTOXO		
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
77.014	Meilaceal	\`\\			
FROM: Me'Lessa Williams Name (Printed or typed)					
• .	600 NM 8	19th Ace			
	Plantation,	F. 33324 State & Zip			
(984) 274-7537 Daytime Telephone 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: Alure Modeling Inc.	05 FEB 10 PM 2: 45 SECRETARY OF STATE TALL AHASSET FLORIDA		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: (206 NW 89th Ave Plantation, FL 33324			
ARTICLE III PURPOSE The purpose for which the corporation is organized is: To provide entertainment to nightclubs and all other pertaning legal activities. ARTICLE IV SHARES The number of shares of stock is:			
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): President-Melessa Williams Vice President-Melessa Williams Secretory-Melessa Williams			

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

mellessa williams Counweath Ace Plantation, FL 33324

Treasur- Me'Lessa Williams

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Mc'Lessa Williams	
bole now 89 th Ace	
Plantation, Fa33324	
*************	***********
Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept, the appointment as registered agen	
The heera William	
Signature/Registered Agent	Date
Mehen Illi	
Signature/Incorporator	Date