

PD5000052569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

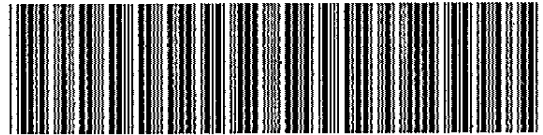
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEAL OF STATE
TALLAHASSEE, FLORIDA

4/11/05
BWK

TRANSMITTAL LETTER

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

SUBJECT: D'LOVELY CORP.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: SANDRA GONZALEZ

Name (Printed or typed)

4202 EAST 4 AVENUE

Address

HIALEAH FLORIDA 33013

City, State & Zip

786 247-4392

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:

D'LOVELY CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4202 EAST 4 AVENUE HIALEAH FLORIDA 33013

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

STARTED BUSSINES

ARTICLE IV SHARES

The number of shares of stock is:

1000.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SANDRA GONZALEZ

6930 BOTLE BRUSH DRIVE MIAMI LAKE 33014

PRESIDENT

ARTICLE VI REGISTERED AGENT

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

EUNICE CABRERA

6930 BOTLLE BRUSH DRIVE MIAMI LAKES 33014

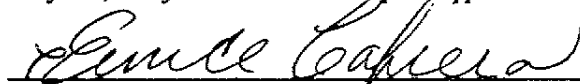
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EUNICE CABRERA

6930 BOTLLE BRUSH DRIVE MIAMI LAKES 33014

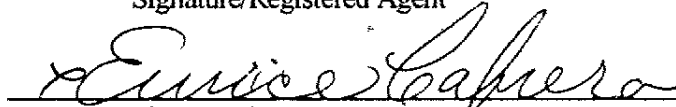
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am famillar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

3-31-05

Date



Signature/Incorporator

3-31-05

Date

FILED

05 APR -4 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA