# P05000057565

(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Estanted Line)				
(Document Number)				
Certified Copies Certificates of Status				
Considerations to Filian Officer				
Special Instructions to Filing Officer:				

Office Use Only



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SECRETARY OF SINE

# TRANSMITTAL LETTER

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

SUBJECT:	Unique Dolla	r Boutique	inc.
	(FROPOSED CORPORA	TE NAME — <u>MUST INCL</u>	UDE SUFF(X)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Rachelle	Printed or typed)	
-	1489 E. Silver Star Rd		
	Ocoee :	FL 34761 State & Zip	
	407-294-007(a Daytime Telephone number		

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



# FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 11, 2005

RACHELLE DAY 1489 E. SILVER STAR ROAD OCOEE, FL 34761

SUBJECT: UNIQUE DOLLAR BOUTIQUE, INC.

Ref. Number: W05000018197

We have received your document for UNIQUE DOLLAR BOUTIQUE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Rejecting and retuning per your request.

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) 245-6067.

Letter Number: 705A00024582

Neysa Culligan Document Specialist New Filings Section

### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED SECRETARY OF STATE TALLAHASSES, LLCRIDA

05 APR 19 AM 8:50

# ARTICLE I NAME

The name of the corporation shall be:

Unique Dollar Boutique, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1489 E. Silver Star Rd. Ocoee, FL 34761

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any and all lawful business

## ARTICLE IV SHARES

The number of shares of stock is: 10,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rachelle Day, Owner 1057 Vizcaya Lake Rd. 106 Ocoee, FL 34761

### ARTICLE VI REGISTERED AGENT

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

Rachelle Day 1489 E. Silver Star Rd. Ocoee FL 34761

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rachelle Day 1057 Vizcaya Lake Rd. 106 Ocoee, FL 34761

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 Rachelle Day

Date

Pachelle Sag

Signature/Incorporator Rachelle Day

Date