# P06000055005

(Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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# **COVER LETTER**

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

SUBJECT:	Sparkle Cut		
<del></del>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	l a check for:
S70.00 Filing Fee	₹ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Pauline Edwards Name (Printed or typed)		
		enstreet, Apt. 1	*
		, Florida 33020 State & Zip	
		801-3290	

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:

Sparkle Cut, inc.

06 APR 17 FH 1:00

SECRETARY OF STATE TALLAHASSEF PLORIDA

Date

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2331 Greenstreet, Apt. 1 Hollywood, Florida 33020

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide a fashionable clothing line to service the working person.

### ARTICLE IV SHARES

The number of shares of stock is:

There is one share of stock for the Sparkle Cut, Inc.

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Pauline Edwards, President

2331 Greenstreet, Apt. 1 Hollywood, Florida 33020

Maurice Thomas, Vice President

17600 NW 5th Avenue, Apt. 1211

Miami, Florida 33169

### ARTICLE VI REGISTERED AGENT

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

Pauline Edwards 2331 Greenstreet, Apt. 1 Hollywood, Florida 33020

### ARTICLE VII INCORPORATOR

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

Signature/Incorporator

Maurice Thomas 17600 NW 5th Avenue, Apt. 1211 Miami, Florida 33169

***************	**********
Having been named as registered agent to accept service of process for the abcertificate, I am familiar with and accept the appointment as registered agent an	ove stated corporation at the place designated in this id agree to act in this capacity
Edund	4/11/06
Signature/Registered Agent	Lt/11/06