P07000018863

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
·							
<u> </u>							

Office Use Only



200085627362

01/24/07--01026--011 **87.50

EB-9 PMI2 ETARY OF ST

JF STATE , FLORIDA

10

COVER LETTER

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

SUBJECT: B	Beautiful Lysa, Inc. (PROPOSED CORPORA)		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	les 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 o
		ADDITIONAL CO	
FROM:	Lysa Serenity Harrel]	
	Name (Printed or typed)	
	2695 SW 183 Avenue	ddress	
	Miramar, FL 33029		
	City,	State & Zip	
	(786) 357-6940 Daytime To	elephone number	
Filing Fee	Filing Fee & Certificate of Status Lysa Serenity Harrel Name (2695 SW 183 Avenue A Miramar, FL 33029 City, (786)357-6940	Filing Fee & Certified Copy ADDITIONAL CO Printed or typed)	Filing Fee, Certified Copy & Certificate of Status

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



January 26, 2007

LYSA SERENITY HARRELL 2695 SW 183 AVENUE MIRAMAR, FL 33029

SUBJECT: BEAUTIFUL LYSA, INC. Ref. Number: W07000004420

We have received your document for BEAUTIFUL LYSA, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return 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 850-245-6052.

Letter Number: 707A00006385

Paisley A Alford New Filing Section Division of Corporations

Form SS	.4	Applicatio	n for E	molo	er Identificatio	n Nu	mber	E	N		
(Rev. Decen	ber 2001)					s, church	es,	20-43	18710		
Department: Treesury	nue Service	government agencies, Indian tribal entities, certain individuals, and other					•	OMB No.	1545-0003		
1" Legain	ame of entity (or inci	vidual) for whom the E	IN is being re	quested	n manaraya a tangan <u>a ny</u> amina						
Lysa /		ifferent from name on I	ine 1)		3 Executor, trustee, "car	re of nam					
Beaut	2 Trade name of business (if different from name on line 1) Beautiful Lysa 4s* Mailing address (room, apt., suite no. and street, or P.O. box)			5e Street address (if different) (Do not enter a P.O. box)							
2695	SW 183 Avenue tate, and ZIP code	2,0010110.01120.017									
Miran	ar FL 33029 -				OD Gry, state, and 21 C	5b City, state, and ZIP code					
	and state where pring Broward State	ncipal business is local FL	ed								
7a Name	of principal officer, g	eneral partner, grantor,	owner, or tru	stor	76 SSN, ITIN, EIN						
Ba* Type of entity (check only one) Sole Proprietor (SSN) 591 95 3640 Partnership Corporation (enter form number to be filed) National Guard Fermers' cooperative Federal government/military Church or church-controlled organization Other nonprofit organization (specify) Other (specify)							ses				
8b ifa.com		tale or foreign country		State		F	oreign countr	y			
Reset Hiredie Compli	Started new business (specify type) Reliable Reliable Changed type of organization (specify new type) Purchased going business Created a trust (specify type) Compliance with IRS withholding regulations Created a pension plan (specify type)										
	xusiness started or a IAN 1 2006	cquired (morth, day, y	ear)		11 Closing month of acc	counting y	199				
		es wete paid or will be p esident alien (month, c			Note: if applicant is a withho		nt, enter date	•			
13 Highes	t number of employe	es expected in the nex	it twelve mon	hs Note:#	the applicant	,	Agriculture	Hausehold	Other		
14° Check Construction Construction Construc	does not expect to have any employees during the period, enter "-0-"										
15" indica Clothir	*	erchandise sold, specil	ic construction	u Mouk dou	ne; products produced; or se	rvices pro	wided.	-			
16e* Has		oplied for an employer i	identification r	rumber for	this or any other business?	*****	Гүе	s P No			
16b If you Legal nar Trade nar	checked "Yes" on in ne ">	ne 16a, give applicant's			neme shown on prior applica						
	oimate date when, a ate date when filed (e, the applicat City and stat		ed. Enter previous employer led	Previo		f known.			
	Complete section only	if you want to authorize th	ne named indivi	duel to rece	ive the entity's EIN and answer o	questions a	bout the comp	etion of this form			
Third Party	Designee's name				Designee's telephone number (include area code)						
Designee	Address and ZIP code				() - Designee's fex number (include area code) () -						
COTTOCK, BING	complete.		application , an	ed to the bes	t of my knowledge and belief, it i	is true,	Applicant's tel	ephone number (i	nclude area code)		
INCIDE SITO	title (type or print cle	any j				1	(796 1 26	7 6040			

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:

Beautiful Lysa, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2695 SW 183 Avenue

Miramar, FL 33029

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A for profit retail business.

ARTICLE IV SHARES

The number of shares of stock is:

One

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Lysa Serenity Harrell, President

2695 SW 183 Avenue

Miramar, FL 33029



ARTICLE VI REGISTERED AGENT

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

Lysa Serenity Harrell

2695 SW 183 Avenue

Miramar, FL 33029

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lysa Serenity Harrell

2695 SW 183 Avenue

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

zy 22, 2007

<u>January 22, 2007</u>

Date

Signature/Incorporator