

**PD7000101358**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

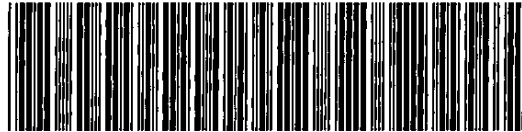
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2007 SEP 11 PM 2:12  
SECRETARY U. STATE  
TALLAHASSEE, FLORIDA

*cf. 9-12*

**COVER LETTER**

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

**SUBJECT: SHOP GIRL USA, INC.**

(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: STEPHANIE MANDELL**

Name (Printed or typed)

**C/O FEDERAL TAX SERVICE 171 WEST 29th ST.**

Address

**NEW YORK NY 10001**

City, State & Zip

**212-239-2900**

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:

SHOP GIRL USA, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

17154 AVENUE LERIVAGE  
BOCA RATON, FL 33496

## 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:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

STEPHANIE MANDELL, PRESIDENT  
17154 AVENUE LERIVAGE  
BOCA RATON, FL 33496

## ARTICLE VI REGISTERED AGENT

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

STEPHANIE MANDELL, PRESIDENT  
17154 AVENUE LERIVAGE  
BOCA RATON, FL 33496

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEPHANIE MANDELL, PRESIDENT  
17154 AVENUE LERIVAGE  
BOCA RATON, FL 33496

\*\*\*\*\*

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

x Stephanie Mandell  
Signature/Registered Agent

x Stephanie Mandell  
Signature/Incorporator

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9-7-07  
Date

9-7-07  
Date