# P07000122669

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SECRETARY OF STATE

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T. Buren NOV 13 2007

# **COVER LETTER**

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

SUBJECT: Le C	hic Window Fashion I	TC. TE NAME – MUST INCL	UDF SUFFIX
	(FROFOSED CORFORA	TE NAME – <u>MOST INCL</u>	<u>ODE SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 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: CI	_ARA JASMIN		
	Name	(Printed or typed)	
	22738 SW 10 STREE	T	•
•	•	Address	<del> </del>
_	BOCA RATON, FL 33		
	City	, State & Zip	
	561-212-8365		
	Daytime 1	Telephone number	

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

# 2007 NOV -9 PM

# ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

# LE CHIC WINDOW FASHION INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 22738 SW 10 STREET BOCA RATON, FLORIDA 33433

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO FABRICATE and SELL CUSTOM WINDOW COVERINGS

### 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):

CLARA E. JASMIN, PRESIDENT 22738 SW 10TH STREET BOCA RATON, FL 33433

HUBERT T. JASMIN, VICE-PRESIDENT 22738 SW 10TH STREET BOCA RATON, FL 33433

### ARTICLE VI REGISTERED AGENT

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

CLARA E. JASMIN 22738 SW 10TH STREET BOCA RATON, FL 33433

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: HUBERT T. JASMIN 22738 SW 10TH STREET BOCA RATON, FL 33433

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 Age

Signature/Incorporator

Date

/3/0