

P08000036831

(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:

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W08000006989

EP 4/11/08

## COVER LETTER

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

**SUBJECT: BEE SPARKLED CORP.**

**(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: LISA HAYWARD**

Name (Printed or typed)

**4115 NW 11 PLACE**

Address

**MIAMI, FLORIDA 33127**

City, State & Zip

**786-712-7543**

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2008

LISA HAYWARD  
4115 NW 11 PLACE  
MIAMI, FL 33127

SUBJECT: BEE SPARKLED CORP.  
Ref. Number: W08000006989

We have received your document for BEE SPARKLED CORP. and your check(s) totaling \$70.00. 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.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected 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) 245-6062.

Eula Peterson  
Regulatory Specialist II  
New Filing Section

Letter Number: 208A00008482

DIVISION OF CORPORATIONS

08 MAR - 7 AM 8:00

RECEIVED

Att. Eula



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 10, 2008

LISA HAYWARD  
4115 NW 11 PLACE  
MIAMI, FL 33127

SUBJECT: BEE SPARKLED CORP.  
Ref. Number: W08000006989

We have received your document for BEE SPARKLED CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

The registered agent initials are not sufficient as a signature.

Please return the corrected 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) 245-6062.

Eula Peterson  
Regulatory Specialist II  
New Filing Section

Letter Number: 208A00008482

RECEIVED  
08 APR 10 AM 8:00  
DIVISION OF CORPORATIONS

## **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:

**BEE SPARKLED CORP.**

### **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

**4115 NW 11 PLACE MIAMI, FLORIDA 33127**

### **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

**URBAN WEAR FOR LADIES, AND YOUTH GIRLS**

### **ARTICLE IV      SHARES**

The number of shares of stock is:

**1**

### **ARTICLE V      INITIAL OFFICERS AND/OR DIRECTORS**

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

**LISA HAYWARD  
4115 NW 11 PLACE  
MIAMI, FLORIDA 33127  
TITLE: OWNER**

**ARTICLE VI REGISTERED AGENT**

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

LISA HAYWARD  
4115 N.W. 11 PLACE  
MIAMI, FL 33127

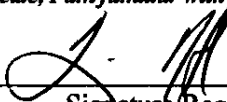
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

April HAYWARD  
3992 N.W. 11 PLACE  
MIAMI, FL 33055

\*\*\*\*\*

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

3/2/08

Date



Signature/Incorporator

3/1/08

Date