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08 JUN -9 PM 4:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** City Beautiful Concierge 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:** Rob D. O'Brien

Name (Printed or typed)

238 Hidden Springs Circle

Address

Kissimmee, FL 34743

City, State & Zip

407-348-8897

Daytime Telephone number

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

City Beautiful Concierge Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

238 Hidden Springs Cir.  
Kissimmee, FL 34743

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose of this corporation is to engage in customer service activities for private and corporate clients including, but not limited to, running errands, event planning, shopping, light housework, research, etc. and in addition bring clients and selected vendors together for mutual business relationships.

### **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):

Rob D. O'Brien 238 Hidden Springs Cir. Kissimmee, FL 34743 Director

### **ARTICLE VI REGISTERED AGENT**

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

Rob D. O'Brien 238 Hidden Springs Cir. Kissimmee, FL 34743


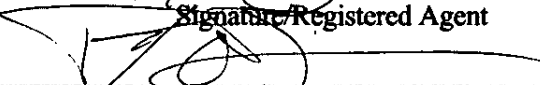
### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Rob D. O'Brien 238 Hidden Springs Cir. Kissimmee, FL 34743

\*\*\*\*\*

*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  
  
\_\_\_\_\_  
Signature/Incorporator

06/03/2008

\_\_\_\_\_  
Date

06/03/2008

\_\_\_\_\_  
Date