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(Re	equestor's Name)			
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PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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SECRETARY OF STATE
ALLAHASSEE, FLORIBA

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COVER LETTER

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

SUBJECT: BOUVARDIA, INC				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
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	
	l	ADDITIONAL CO	PY REQUIRED	
FROM:	ASIF AKBAR			
	Name (Printed or typed) 2738 STAR GRASS CIR.			
	Address KISSIMMEE FL-34746			
·	city, s 850 - (407)	State & Zip 452 876	30	

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

í.

The name of the corporation shall be:

BOUVARDIA . INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2738 STARGRASS CIR KISSIMMEE, FL- 34746

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

JEWELRY RETAIL

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):

238 KISSIMMEE 34746 - PRESIDENT ASIF AKBAR 2738 STARGRASS CIR

1 KISSIMMER. PL-34746 _ VICE PRESIDENT JULIE AKBAR 2738 STARGRASS CIR

2738 STARGRASS CIR KISSIMMEE FL-34746 _ DIRECTOR. WALI AKBAR

ARTICLE VI REGISTERED AGENT

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

AKBAR

KISSIMMIEE FL-34742 STARGRASS CIR

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ASIF AKBAR

KISSIMMEE FZ-34746 CIR STARGRASS

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

Au6 -4- 2008

Date

Au6-4- 2008

Date

PALLAHASET OF TOE

Signature/Registered Agent

Signature/Incorporator