Po 8000	079226
(Requestor's Name) (Address) (Address)	900134638329
(City/State/Zip/Phone #)	08/27/0801008002 **70.00
(Document Number) Certified Copies Certificates of Status	ZUBAUG 21 PI
	ASSERFICATION

Office Use Only

COVER LETTER

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

SUBJECT: FABULOUS SPACES OF THE PALM BEACHES INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

ST0.00 Filing Fee

z

\$78.75Filing Fee& Certificate of Status

□ \$78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED

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

/

₹. i.

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:

ABULOUS SPAces of The PLIM Beaches, Inc.

ARTICLE II PRINCIPAL OFFICE

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

7225 Whitehaven DRive BOCA RATON, FL 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

lawf businers any

ARTICLE IV SHARES

The number of shares of stock is:

00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

LIND	SEYTURE	Pres, Directed
LISA	CRANE	Pres., Directed

ARTICLE VI **REGISTERED AGENT**

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

LINDSEY TURE SKY 17225Whitehaven BOCA RATON, FZ. 33496

ARTICLE VII INCORPORATOR The name and address of the Incorporator is:

ISA CRANE

980 Queenferry arcle 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

Signature/Incorporator