

PD9000067087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

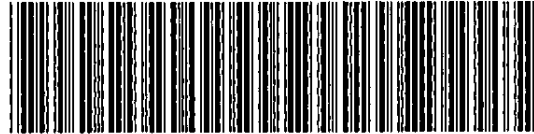
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Certified Copies ☒

Certificates of Status ☐

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RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
NOT FILED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

09 AUG 10 AM 10:31 2009 AUG 10 AM 10:25

FILED

*David*  
8/10/09

## COVER LETTER

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

SUBJECT: Dolce Diva, 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: Randa Dreiza  
Name (Printed or typed)

3111 Mahan Dr. Suite 300  
Address

Tallahassee FL 32308  
City, State & Zip

850. 339. 8167  
Daytime Telephone number

randadee@yahoo.com  
E-mail address: (to be used for future annual report notification)

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

# ARTICLES OF INCORPORATION

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

**FILED**

09 AUG 10 AM 10:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

Dolce Diva, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

3111 Mahan Dr. Suite 300  
Tallahassee FL 32308

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

(Professional Skin Care)  
Full Service Salon.

## ARTICLE IV SHARES

The number of shares of stock is:

2,000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Randa Dreiza  
3111 Mahan Dr. Suite 300  
Tallahassee FL 32308

## ARTICLE VI REGISTERED AGENT

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

Randa Dreiza  
3111 Mahan Dr. Suite 300  
Tallahassee FL 32308

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

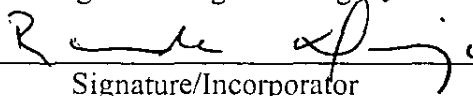
Randa Dreiza  
3111 Mahan Dr. Suite 300  
Tallahassee FL 32308

\*\*\*\*\*

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

8.10.2009  
Date

  
Signature/Incorporator

8.10.2009  
Date