

P090000081399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

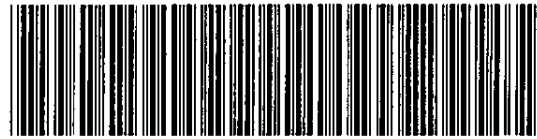
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10-2-09

COVER LETTER

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

SUBJECT: BOLERO FASHIONS, 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: CRISTINA RODRIGUEZ
Name (Printed or typed)

5220 DAVIE ROAD
Address

DAVIE, FL. 33314
City, State & Zip

954 797-5060 EXT 213
Daytime Telephone number

tom@heritagetaxservices..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)

ARTICLE I NAME

The name of the corporation shall be:

BOLERO FASHIONS, INC

ARTICLE II PRINCIPAL OFFICE

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

6261 SW 41ST PLACE
DAVIE, FL. 33314

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FASHION DESIGN AND ANY OTHER LEGAL BUSINESS IN FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PATRICIA S WARD
6261 SW 41ST PLACE
DAVIE, FL 33314

ARTICLE VI REGISTERED AGENT

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

PATRICIA S WARD
6261 SW 41ST PLACE
DAVIE, FL 33314

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PATRICIA S WARD
6261 SW 41ST PLACE
DAVIE, FL 33314

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

SEPTEMBER 24, 2009

Date

SEPTEMBER 24, 2009

Date

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CLERK OF COUNTY
DAVIE, FL 33314