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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Southern variable)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600181657576

06/09/10-01008-001 **78.75



10-10-10 OR

COVER LETTER

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

SUBJECT: Six Lov	e Inc			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:	
□ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	ADDITIONAL COPY REQUIRED	
FROM: Ke	vin Ransford Williams Nam	e (Printed or typed)		
566	2 NW 120th Ave	······································		
		Address		
Cor	al Springs, FL 33076	C 9. 7'-		
	City	, State & Zip		
954	-346-3438			
	Daytime '	Celephone number		
Kevi	inransford@gmail.com			
	E-mail address: (to be use	ed 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:

Six Love Inc

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is:

5662 NW 120th Ave

Coral Springs, FL

33076

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Restaurant Cafe

<u>ARTICLE IV SHARES</u>

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Kevin Williams

5662 NW 120th CEO ave Coral Springs

EL 22076

FL 33076

ARTICLE VI REGISTERED AGENT

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

Gosonex INC

5662 NW 120th Ave

Coral Springs FL 33076

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Kevin Ransford Williams

5662 NW 120th Ave

Coral Springs, FL

33076

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

Levin D Williams	6/7/10
Signature/Registered Agent	Date
Koir D Williams	6/7/10
Signature/Incorporator	Date

10 Jun -9 AN ID: SE SECRETARY OF STATE