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(Requestor's Name)			
(Address)			
(Address)			
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(City/State/Zip/Phone #)			
·			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dusiness Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
<u></u>			
Special Instructions to Filing Officer:			

Office Use Only



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COVER LETTER

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

SUBJECT:	La Princess P	roperties	
Enclosed are an orig	(#ROPOSED CORPORA ginal and one (1) copy of the art		
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	*\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee. Certified Copy & Certificate of Status
FROM:	Princess N Name 3669 Uncle		
		Address 32312	,

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

E-mail address: (to be used for future annual report notification)

850 893-9904 Daytime Telephone number

ARTICLES OF INCORPORA In compliance with Chapter 607 and/o			
ARTICLE I NAME The name of the corporation shall be: Laprincess Properties	es Inc.		
ARTICLE II PRINCIPAL OF. The principal street address and mailing			
3669 Uncle Glover	RA TAllahasse	e,Florida s	12312
The purpose for which the corporation	-	_1	
ARTICLE IV SHARES The number of shares of stock is:		SECRETARY O	10 AUG 30 FM
List name(s), address(es) and specific	,	FLORID	
Homar Meloy owner Princess Meloy V. pr ARTICLE VI REGISTERED	O AGENT	*	
The name and Florida street address Frincess My Coy 3669 Uncle Glover Re	(P.O. Box NOT acceptable) of th	e registered agent is:	
ARTICLE VII INCORPORAT The name and address of the Incorpor	<u> COR</u>		
Princess Meloy suco 9 Uncle Glover TAllah ASSEE, FIA		*******	******
Having been named as registered age place designated in this certificate, I agree to act in this capacity	ent to accept service of process j		
Ry Signature/Registered	Agent		0_