## P11000022206

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies C	ertificates of Status		
Special Instructions to Filing Officer:			
Operational to 1 ming officer.			

Office Use Only



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03/02/11--01009--004 \*\*78.75

INAR -2 AN 9: 29
SECRETARY OF STATE
TALLAHASSEE, FLORING

-K 03/08/10

## **COVER LETTER**

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

SUBJECT: BOOTIC TOCOTA	orated		
(PROPOSED CORPORA	TE NAME – MUST INCLUDE SUFFIX)		
Enclosed are an original and one (1) copy of the arti-	cles of incorporation and a check for:		
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certificate of Status		
	ADDITIONAL COPY REQUIRED		
	(Printed or typed)		
GHO N. E. 43rd Street Apt#			
Carbond Party	FL 33334 State & Zip		
994-802-48 GE Daytime To	elephone number		
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 The name of the	NAME corporation shall be:	- ncorporate	$\mathcal{A}$
ARTICLE II	PRINCIPAL OFFICE  CHORING HARDS SH ACH HARDS SH ACH HARDS PACE FL 55133	, _	address if different is:
ARTICLE III The purpose for VOTICT DEAUTY	which the corporation is organized is: 10 1 CF SERVICES I.E. CUST 1 and Marketing.		
ARTICLE IV The number of sl  ARTICLE V  Name and Address:	INITIAL OFFICERS AND/OR DIRECTO	Profes that Howe autstanding 100 shares (Manne and Title:  Address:	nis Corporation 15 to at any one time is at nor parvalue.
Name and Address:	Title:	Name and Title: Address:	AR AR
Address:	Title:	Name and Title: Address:	7 2 2 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
The name and F Name: Address:	REGISTERED AGENT  Torida street address (P.O. Box NOT acceptable) of the control	of the registered agent is:  -Ap+   3334	29 11E 11DA
ARTICLE VII The name and a Name: Address:	INCORPORATOR  ddress of the Incorporator is:	53302)	
Having been na this certificate, I	med as registered agent to accept service of proce am familiar with and accept the appointment as re	ss for the above stated corporistered agent and agree to a	oration at the place designated in act in this capacity
	Required Signature/Registered Agent  cument and affirm that the facts stated herein are  Department of State constitutes a third degree felou		
_Ch	Required Signature/Incorporator		02-27-201