## P11000040245

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## COVER LETTER

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

SUBJECT: SHOE FASHION QUIN	NCY, INC				
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	LUDE SUFFIX)			
Enclosed are an original and one (1) copy of the arti	icles of incorporation and	d a check for:			
\$70.00 \$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: SHOE FASHION QUINCY	Y INC (Printed or typed)				
1350 SW 175 WAY	Address	<del></del>			
PEMBROKE PINES, FL	33029 State & Zip				
954-864-4911 Daytime To	elephone number	2011 APR 2 SEGRETAI TALLAHAS			
YUNICO@AOL.COM / E-mail address: (to be used	for future annual report i				

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 cor	NAME SHOE FASHION QUIN	CY INC			
ARTICLE II	PRINCIPAL OFFICE				
	Principal street address	Mailing address, if different is:			
	604 W. JEFFERSON STREET	1350 SW 175 WAY PEMBROKE PINES, FL 33029			
Ω	UINCY, FL 32351				
ADMINI D III	Nympoor				
The nurnose for wh	nich the corporation is organized is:			,	
RETAIL SHO					
ARTICLE IV The number of share	SHARES				
ine number of snare	es of stock is:1 OU				
	INITIAL OFFICERS AND/OR DIRECTOR				
Name and Tit Address:	le:HAMZA ISMAIL, DIRECTOR 1604 W. JEFFERSON STREET QUINCY, FL 32351	_ Address:	GUILLERMO BA 1604 W. JEFFI QUINCY, FL 3:	ERSON STREI	ET
Name and Tit Address:	le:	Name and Title Address:	::		
Name and Tit Address:	le:	Name and Title Address:	:		<del></del> 
				<del>-</del>	<del>_</del>
ADTIOLE IT	DECICATION ACTION	<del>-</del>			-
	REGISTERED AGENT ida street address (P.O. Box NOT acceptable) of	the registered ages	nt ic:	APR CRET	Springer
Name:	HAMZA ISMAIL	the registered ages	it 13.	25 Se	- Indian
Address:	1604 W. JEFFERSON STREET QUINCY, FL 32351	- - -		PH SEE.F	
ARTICLE VII	INCORPORATOR			55 R	-
The name and addr	ress of the Incorporator is:			20.5 ω ω	
Name:	HAMZA ISMAIL	_		-	
Address:	1604 W. JEFFERSON STREET QUINCY, FL 32351	~ ~			
Having been named this certificate, I am	l as registered agent to accept service of process familiar with and accept the appointment as regi	s for the above sta istered agent and a	ited corporation at the	he place designated apacity	d in
Ha	Required Signature/Registered Agent		4,	124/11	
	Required Signature/Registered Agent		<del></del>	Date	
I submit this docum document to the Dep	nent and affirm that the facts stated herein are partment of State constitutes a third degree felony	true. I am aware as provided for ir	that the false infort 1 s.817.155, F.S.	mation submitted i	n a
2/			11	11541	
	Required Signature/Incorporator		_9	/24/11 Date	_
	required Signaphre/metriporator			· Dak	