P11000101599

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





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11/23/11--01020--004 **70.00

SECHETAIN OF STATE TALLAHASSEE FLORIDA



1/4

COVER LETTER

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

SUBJECT: FASHION ROOM BOU	ITIQUE,INC	
(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
	ADDITIONAL C	OPY REQUIRED
FROM: JORGE D HEREDIA CPA	(Printed or typed)	
1428 SW 124 PL	Address	
MIAMI,FL 33184	State & Zip	
305 552-73-21 Daytime To	elephone number	
ABAD1@BELLSOUTH.N		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 No. The name of the corpo		OUTIQUE,INC	11 NOV 23 PM 4: 39
ARTICLE II PI	RINCIPAL OFFICE		Off Committee to the committee
	Principal street address	Mailing	saddra SECRETARIA STATE
	6 SW 73 CT UNIT 1809 MI,FL 33156		
THE PUT IN T	h the corporation is organized is:		
ARTICLE IV SI		TORS	
Name and Title	BRIGETTE PADRON	Name and Title:	
Address:	9066 SW 73 CT UNIT 1809 MIAMI,FL 33156	Address:	
	PRESIDENT		
Name and Title Address:	:	Address:	
Name and Title Address:	:	Address:	
	BOZOGBBBB AGBAN		
	<u>EGISTERED AGENT</u> I <u>a street address</u> (P.O. Box NOT acceptab	ole) of the registered agent is:	
Name: Address:	JORGE D HEREDIA CPA 1428 SW 124 PL MIAMI, FL 33184		
ARTICLE VII II	NCORPORATOR		
	ss of the Incorporator is:		•
Name: Address:	BRIGETTE PADRON 9066-SW 73 CT UNIT 1809 MIAMI,FL 33156		
	as registered agent to accept service of p familiar with and accept the appointment		
			11/16/10
,	Required Signature/Registered Agen	ıt	Date
	ent and affirm that the facts stated herei artment of State constitutes a hird degree	in are true. I am aware that t	