

A2000019676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

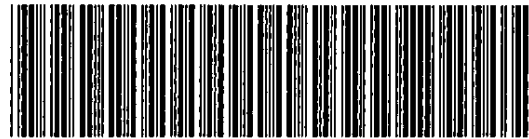
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/27/12--01026--003 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 FEB 27 AM 9:47

PS 2/28/12

## COVER LETTER

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

SUBJECT: KATY CLOTHING & SHOES WHOLESALE INC.  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee  
☒ \$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: OSMEL L RODRIGUEZ

Name (Printed or typed)

4967 E 8 CT

Address

HIALEAH FL 33013

City, State & Zip

305-632-5187

Daytime Telephone number

OSMELLRODRIGUEZ@YAHOO.COM

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)

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**ARTICLE I NAME**

The name of the corporation shall be: KATY CLOTHING & SHOES WHOLESALE INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
4967 E 8 CT  
HIALEAH FL 33013

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

MAKE BUSINESS TO SELL TO GENERAL PUBLIC CLOTHING, SHOES ACCESORIOS AND DOLLAR ITEMS ,VIA INTERNET OR LOCAL STORE WHOLESALE GENERAL MERCHANDISE UNDER THE FLORIDA LAW.

**ARTICLE IV SHARES**

The number of shares of stock is: THE NUMBERS OF SHARE IS 1000 AT VALUE OF \$ 2.00

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: OSMEL L RODRIGUEZ  
Address: 4967 E 8 CT  
HIALEAH FL 33013  
PRESIDENT

Name and Title: NAYSI RAMOS  
Address: 4967 E 8 CT  
HIALEAH FL 33013  
VICE-PRESIDENT

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

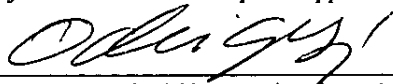
Name: OSMEL L RODRIGUEZ  
Address: 4967 E 8 CT  
HIALEAH FL 33013

**ARTICLE VII INCORPORATOR**

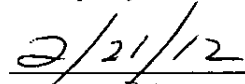
The name and address of the Incorporator is:

Name: OSMEL L RODRIGUEZ  
Address: 4967 E 8 CT  
HIALEAH FL 33013

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

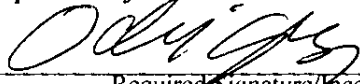


Required Signature/Registered Agent

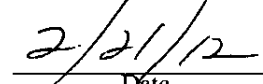


Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator



Date