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(Re	equestor's Name)	·			
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate:	s of Status			
Special Instructions to Filing Officer:					
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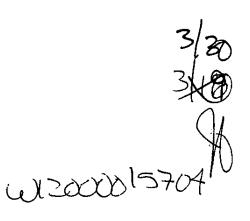
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COVER LETTER

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

SUBJECT:Rona Café, Inc
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:
\$70.00 " \$78.75 Filing Fee & Certificate of Status \$78.75 \$78.75 \$87.50 Filing Fee & Certified Copy & Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED
FROM: Rose Guillaume Name (Printed or typed)
4126 Inverrary Blvd, Apt. 2718
Lauderhill FL 33319 City, State & Zip
954 226-2728 Daytime Telephone number
roseguillaume09@comcast.net E-mail address: (to be used for future annual report notification)

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



RECEIVED 12 MAR 29 PH 2: 44

SECRETARY OF STATE
FLORIDA DEPARTMENT OF STATE
Division of Communication o

March 20, 2012

ROSE GUILLAUME 4126 INVERRARY BLVD APT 2718 LAUDERHILL, FL 33319

SUBJECT: ROSE'S PETALS, INC. Ref. Number: W12000015704

We have received your document for ROSE'S PETALS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 212A00009669

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the	NAME Rona Café, Inc		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing address,	if different is:
	4126 Inverrary Blvd, Apt. 2718		
	Lauderhill FL 33319		
ARTICLE III	PURPOSE		
The purpose for	which the corporation is organized is:		
Any lawful b	ousiness.		
ARTICLE IV	SHARES pares of stock is: 100 Shares		
the number of sr	hares of stock is: 100 Strates		
	INITIAL OFFICERS AND/OR DIRECTOR		•
	Title: Rose Guillaume, Pres	Name and Title:	
Address:	4126 Inverrary Blvd, Apt. 2718	_ Address:	
	Lauderhill FL 33319		
		-	
Name and	Title:	Name and Title:	
Address:		Address:	
			
Name and	Title:	Name and Title:	_
Address:		Address:	
		_	
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable) of	the registered agent is:	70° 18
Name:	Rose Guillaume	_	
Address:	4126 Inverrary Blvd, Apt. 2718	_	
	Lauderhill FL 33319	_	
ARTICLE VII	INCORPORATOR		
	ddress of the Incorporator is:		195
Name:	Rose Guillaume	_	7
Address:	4126 Inverrary Blvd, Apt. 2718	-	<u>ග</u> 🚔
	Lauderhill FL 33319	_	S 25
Havina baan na	med as registered agent to accept service of proces.	s for the above stated corporation	at the place designated in
this certificate	Am familiar with and appept the appointment as reg	istered agent and agree to act in th	is capacity
1/2	20		2/2/2
SAFE	Tillmaine		S/ X8/ / X
	Required Signature/Registered Agent		Pate
		a a same a same	lucione de la contraction de l
	cument and affirm that the facts stated herein are		
uocument to the	Department of State constitutes a third degree felon	y us provided for in s.o.i /.155, F.S	
THE STATES	The Th	3	128/12
7 7 6 F	Regulared Signature/Incorporator	———	Date
	7//	/	/