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2012 MAR 30 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers APR 02 2012

COVER LETTER

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

SUBJECT: JOLIE PAPILLON ENTERPRISES, 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: DIANNE WILLIAMS
Name (Printed or typed)

1511 SW 119TH AVE
Address

PEMBROKE PINES, FL. 33025
City, State & Zip

954-591-5390
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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 NAME

The name of the corporation shall be: JOLIE PAPILLON ENTERPRISES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
1511 SW 119TH AVE
PEMBROKE PINES, FL 33025

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide products and Beauty services in
Beauty, health and wellness.

ARTICLE IV SHARES

The number of shares of stock is: 1000 SHARES. TO BE DIVIDED 80% DIANNE WILLIAMS AND 20% DARIEN O MORGAN

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DIANNE WILLIAMS/ CEO
Address: 1511 SW 119TH AVE
PEMBROKE PINES, FL 33025

Name and Title: DARIEN O. MORGAN/VP
Address: 222 BROWER ST # 1703
DALLAS, TEXAS 75201

Name and Title: DIANNE WILLIAMS/ PRESIDENT
Address: 1511 SW 119TH AVE
PEMBROKE PINES, FL 33025

Name and Title: DARIEN O. MORGAN/ TREASURER
Address: 222 BROWER ST # 1703
DALLAS, TEXAS 75201

Name and Title: DIANNE WILLIAMS/ CMO
Address: 1511 SW 119TH AVE
PEMBROKE PINES, FL 33025

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

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

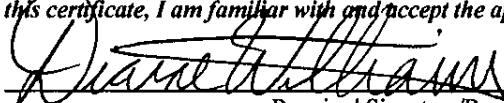
Name: DIANNE WILLIAMS
Address: 1511 SW 119TH AVE
PEMBROKE PINES, FL 33025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

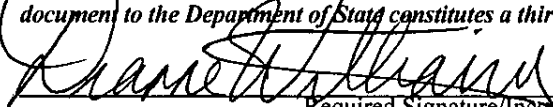
Name: DIANNE WILLIAMS
Address: 1511 SW 119TH AVE
PEMBROKE PINES, FL 33025

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

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TALLAHASSEE, FLORIDA
3/23/12
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

3/23/12
Date