

P12 0000 34957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

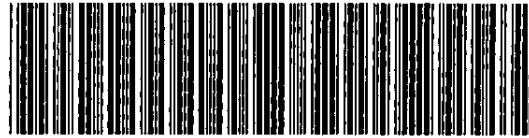
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~W12-18630~~

Office Use Only



100226973781

04/02/12--01044--021 **78.75

FILED
12 APR 11 PM 12:41
STATE OF FLA.
TALLAHASSEE, FL 32309

VH1

COVER LETTER

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

SUBJECT: Luxe Life Co.

(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: Daniel Caballero

Name (Printed or typed)

12166 Natalies Cove Rd

Address

Cooper City, FL 33330

City, State & Zip

954-684-8888

Daytime Telephone number

d.ocando@yahoo.com

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 3, 2012

DANIEL CABALLERO
12166 NATALIES COVE RD
COOPER CITY, FL 33330

SUBJECT: LUXE LIFE CO.
Ref. Number: W12000018630

We have received your document for LUXE LIFE CO. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 812A00010915

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:

Luxe Life Co.

ARTICLE II PRINCIPAL OFFICE

Principal street address

12166 Natalies Cove Rd

Cooper City Fl

33330

Mailing address, if different is:

12 APR 11 PM 12:41

DEPARTMENT OF STATE

TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Clothing Brand.

ARTICLE IV SHARES

The number of shares of stock is: **1000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Daniel Caballero CEO**

Address: **12166 Natalies Cove Rd**

Cooper City Fl

33330

Name and Title: **Jay Jacobi Sales Manager.**

Address: **10211 Caracas Street**

Cooper City Fl

33026

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: **Daniel Caballero**

Address: **12166 Natalies Cove Rd Cooper City Fl, 33330**

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Name: **Daniel Caballero**

Address: **12166 Natalies Cove Rd**

Cooper City Fl, 33330

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

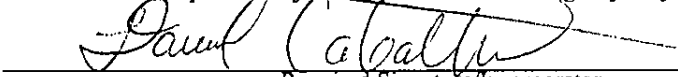


Required Signature/Registered Agent

4/7/12

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

3/29/12

Date