

P12000054578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

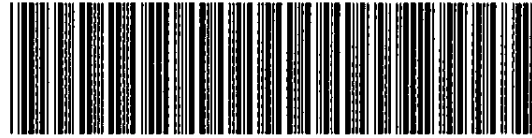
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800236226268

06/15/12--01023--012 \*\*78.75

FILED  
12 JUN 15 PM 2:29  
SECRETARY 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: PRETTY SUITE, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: IVETTE GIL Gutierrez  
Name (Printed or typed)

4197 Napoli Drive  
Address

Riviera Beach F.L. 33410  
City, State & Zip

561-429-3156  
Daytime Telephone number

IVETTEGIL@PRETTYSUITEINC.COM  
E-mail address: (to be used for future annual report notification)

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

# Pretty Suite Inc

June 5, 2012

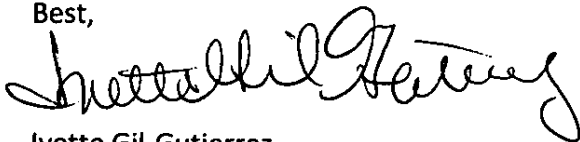
From: Ivette Gil- Gutierrez  
235 Sunrise Ave Suite C7  
Palm Beach, Fl 33488

To: Florida Department Of State  
Division Of Corporations  
P.O Box 6327  
Tallahassee, Fl 32314

To Whom It May Concern,

I do not intend to reinstate the corporation Pretty Suite, Inc. However, I intend to incorporate a new business using the Pretty Suite Inc. name at the above location. If there are any concerns please contact me at the following information [ivettegil@prettysuiteinc.com](mailto:ivettegil@prettysuiteinc.com).

Best,



Ivette Gil-Gutierrez



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 11, 2012

IVETTE GIL GUTIERREZ  
4197 NAPOLI DRIVE  
RIVIERA BEACH, FL 33410

SUBJECT: PRETTY SUITE, INC.  
Ref. Number: W12000031649

We have received your document for PRETTY SUITE, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

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

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 512A00016388

ARTICLES OF INCORPORATION

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

ARTICLE I NAME PRETTY SUITE, INC.
The name of the corporation shall be:

FILED

12 JUN 15 PM 2:29

ARTICLE II PRINCIPAL OFFICE
Principal street address
235 SUNRISE AVENUE
SUITE C7
PALM BEACH, FL 33480

Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
BEAUTY SALON SERVICES

ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: IVETTE GIL PRES/SEC Name and Title:
Address: 235 SUNRISE AVE Address:
SUITE C7
PALM BEACH, FL 33480

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: IVETTE GIL Gutierrez
Address: 235 SUNRISE AVE SUITE C7
PALM BEACH, FL 33480

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: YVETTE ROCHEFORT
Address: 12401 88TH PL N
WEST PALM BEACH, FL 33412

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

[Signature]
Required Signature/Registered Agent

6/5/12
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.

[Signature]
Required Signature/Incorporator

6/5/12
Date