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COVER LETTER

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

	Galleria Inc.		
SOBJECT.	(PROPOSED CORPORAT)	E NAME – <u>MUST INCL</u>	DE SUFFIX)
Enclosed is an original a	and one (1) copy of the Artic	les of Incorporation and	l 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
		ADDITIONAL CO	OPY REQUIRED
FROM:	Moliette Bonhomme	nted or typed)	
	1110 Nw 184th Drive		_
	Miami, FL 33169	dress	
	City, State & Zip		-
	786-546-6604		
	Daytime Tele	phone number	and the second s
	mbonhomme87@gmail.c		
]	E-mail address: (to be used for fu	ture annual report notificat	ion)

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

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I	NAME Freda's Galleria Inc	, Te		
The name of the co		·		
ARTICLE II	PRINCIPAL OFFICE			
	Principal street address 1110 NW 184th Drive		Mailing address, if different is:	
	Miami, Florida 33169			
	iviarii, i londa 33103			
ARTICLE III	PURPOSE			
The purpose for w	hich the corporation is organized is: any activities or business under	laur af tha I laitead Otat	han and Otata of Florida an	المستدادة
no engange in	Chaapter 607, Florida Statues, as	the same be form tin	ies and State of Florida ar	na not
promoted by	oridaptor 607, Florida Otatues, as	the same be form th	ne to time amended.	
ARTICLE IV	MANNER OF ELECTION The manner	er in which the directors are el	lected and appointed:	
The aggregat	e number of share which the cond	pration is authorized to	o issue the One Hundred ((100)
Snares of con	nmon stock. such shall be of single INITIAL OFFICERS AND/OR DIREC tle: Millora Morley, Director	e class and shall be o E tors	ne dollar (\$1.00) per valu	e per
Name and Ti	tle: Milora Morley, Director	Name and Title:		
Address:	1010 IAE 129 Stieff	Address:		
	Mlami, FL 33162			
	Meliatta Danhamma			
	tle: Moliette Bonhomme 1110 NW 184th Drive			
Address:	Miami, FL 33169	Address:		
				
			····	
Name and Ti	tle:			
	en etter			
ARTICLE VI	REGISTERED AGENT			
	rida street address (P.O. Box NOT acceptabl Mollette Bonhomme	e) of the registered agent is:		
- 10001101	1110 NW 184th Drive			
Address:	Miami, FL 33169		二 二 2	prorpha _{se}
	ivilatili, i E do ros		Down and the second a	ri k
4 #3/07/17 #3 Y7F7	***************************************		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	graphine.
ARTICLE VII he name and add	INCORPORATOR ress of the Incorporator is:		ni-	li E
Name:	Miliora Moriey			
Address:	1616 NE 159 Street			, estat
	Miami, FL 33162			, 15 ⁻
laving been name	ed as registered agent to accept service of p	rocess for the above stated (corporation at the place designate	ed in this
ertificate, I am fan	niliar with and accept the appointment as reg	istered agent and agree to ac	t in this capacity	
A	242		June 15, 2012	
· · · · · · · · · · · · · · · · · · ·	Required Signature of Registered Age	nt	Date	•
submit this docun	nent and affirm that the facts stated herein a	re true. I am aware that anv	false information submitted in a i	locumen
the Department	of State constitutes a third degree felony as pr	ovided for in s.817.155, F.S.	J	
,	()		June 15, 2012	
-	Required Signature of Incorpora	itor	-	-
	redamen pikuanne oi incolbola	AUI	Date	