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FALLAHASSEE, FLORIDA

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COVER LETTER

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

,				
SUBJECT:	graful, Inc	•		
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCLUDE SUFFIX</u>)		
Enclosed are an or	riginal and one (1) copy of the ar	ticles of incorporation and a check for:		
_/				
\$70.00 Filing Fee	\$78.75 Filing Fee	\$78.75 \$87.50 Filing Fee,		
rining rec	& Certificate of Status	& Certified Copy Certified Copy & Certificate o		
		Status ADDITIONAL COPY REQUIRED		
FROM:	Jennifer N	Jeuman		
-	Nan	ne (Printed or typed)		
6619 S. Dixie Hwy, #216				
Address				
Miami, F2 33/43 City, State & Zip				
info@grBfulcouture, com				
Daytime Telephone number				
111+0 Ce grotul couture, com				
E-mail address: (to be used for future annual report notification)				

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:	Inc.	
ARTICLE II PRINCIPAL OFFICE Principal street address		Mailing address, if different is:
6619 S. Dixie Hwy = Mami, Fr 33143	#216 <u> </u>	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
Development and S and apparel and an	sales of iy and al	Skincare products l lautul business
ARTICLE IV SHARES The number of shares of stock is:		
Name and Title: Sengle Newman, Address: Ge/a S. Dix ic Hung	CCIALAT Name a	nd Title:s:
Name and Title:Address:		
Name and Title: Address:		
- Miami, Fi 331	tuy # 216	ered agent is:
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is: Name: Address: Address: Address: Address:	an huy #216	
Having been named as registered agent to accept service this certificate, I am familiar with and accept the appoint		ent and agree to act in this capacity
Required Signature/Registered	AM I Agent	
I submit this document and affirm that the facts stated document to the Department of State constitutes a third a		
1 . 1/1 200		(/ No. 1. 1 . 201)