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(Requestor's Name)				
(Ad	dress)			
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PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
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(Do	cument Number)			
(50				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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## **COVER LETTER**

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

SUBJECT: LUC	ky Beggar, Inc.		
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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 CO	OPY REQUIRED
FROM: R	amon Smith	e (Printed or typed)	
24	458 Huron Circle		
		Address	
K	issimmee, FL 34	746	
	City,	State & Zip	
40	07-452-4600	,	
<del></del>	Daytime T	elephone number	
rs	mith623@msn.com		
	E-mail address: (to be use	d for future annual report	notification)

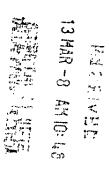
NOTE: Please provide the original and one copy of the articles.



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2013

RAMON SMITH 2458 HURAN CIRCLE KISSIMMEE, FL 34746



We have received your document for LUCKY BEGGARS, INC. 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 state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 113A00004490

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

name of the corpora	tion shall be: Lucky Beggar Inc.		FILED
	NCIPAL OFFICE Principal street address	Mailing address, if di	13 MAR -8 PM 2
458 Huron C		T.	SECRETARY OF STA ALLAHASSEE, FLOR
issimmee, F	I. 34746		remassil. FLOR
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e purpose for which t	POSE he corporation is organized is:	Sale of articles of cloth	ning
P*************************************			
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TICLE IV SHA	ires 4		
RTTCLE IV SHA	tres stock is:		
number of shares of	stock is:		
e number of shares of	stock is: '  ITAL OFFICERS AND/OR DIRECTOR	_	
e number of shares of	rtat officers and/or birector Ramon Smith- President	Name and Title:	·····
e number of shares of	rtal officers and/or director Ramon Smith- President 2458 Huron Cir.	_	
number of shares of	rtat officers and/or birector Ramon Smith- President	Name and Title:	
number of shares of  TICLE V INT  Name and Title	rtal officers and/or director Ramon Smith- President 2458 Huron Cir.	Name and Title:	
number of shares of TTCLE V INT  Name and Title  Address	rtal officers and/or director Ramon Smith- President 2458 Huron Cir.	Name and Title:Address:	
number of shares of TTCLE V INT  Name and Title  Address	rtal officers and/or director Ramon Smith- President 2458 Huron Cir. Kissimmee, Fl. 34746	Name and Title:  Address:  Name and Title:	
Name and Title:  Name and Title:	rtal officers and/or director Ramon Smith- President 2458 Huron Cir. Kissimmee, Fl. 34746	Name and Title:  Address:  Name and Title:	
Name and Title:  Name and Title:	rtal officers and/or director Ramon Smith- President 2458 Huron Cir. Kissimmee, Fl. 34746	Name and Title:  Address:  Name and Title:	
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Name and Title: Address  Name and Title: Address	rtal officers and/or director Ramon Smith- President 2458 Huron Cir. Kissimmee, Fl. 34746	Name and Title:  Address:  Name and Title:  Address:  Name and Title:	

Name a	and Title:	Name and Title	
Addre	ss	Address:	FILED  13 MAR -8 PM 2 32
			13 MAR -8 PM 9 90
			SECRETARY OF
			SECRETARY OF STATE TALLAMASSEE, FLORIDA
ARTICLE VI		\ - 64b	
The <u>name and</u>	Florida street address (P.O. Box NOT acceptable	of the registered age	ent is:
Name:	Ramon Smith	<del></del>	
Address:	2458 Huron Cir.		
	Kissimmee, Fl 34746	<del></del>	
ARTICLE VI	I INCORPORATOR  address of the Incorporator is:		
Name:	Ramon Smith		
Address:	2458 Huron Cir.	<del></del>	
	Kissimmee, Fl 34746		
	amed as registered agent to accept service of proc I am familiar with and accept the appointment as		
110			3/4/13
	Required Signature/Registered Agent		Date
	ocument and affirm that the facts stated herein a e Department of State constitutes a third degree fet		
			2/4/13
R.a.	Required Signature/Incorporator		Date