

P13000065848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Monica Hoyt **DAVE**

AUTHORIZATION BY PHONE TO

CORRECT Article I

DATE 8/12/13

DOC. BY MRD

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08/06/13--01023--001 **78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
8/12/13

COVER LETTER

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

SUBJECT: Delightful Curves Boutique Corp.
(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 ☒ \$78.75
Filing Fee Filing Fee
& Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Monica Hoyt
Name (Printed or typed)
3321 NW 17 Street
Address
Fort Lauderdale FL, 33311
City, State & Zip
(754) 366-5543
Daytime Telephone number
DelightfulCurvesBoutique@gmail.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:

Delightful Curves Boutique Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3321 nw 17 street

fort lauderdale, fl

33311

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

transacting any lawful business

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

CEO/Monica Hoyt

Name and Title:

Address

3321 NW 17 Street

Address:

Fort Lauderdale, FL

33311

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(conti.)

Name and Title: _____

Name and Title: _____

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Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: _____

Monica Hoyt

Address: _____

3321 NW 17 Street

Fort Lauderdale fl,33311

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: _____

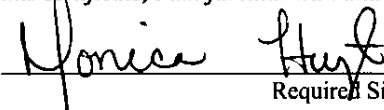
Monica Hoyt

Address: _____

3321 NW 17 Street

Fort Lauderdale fl,33311

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

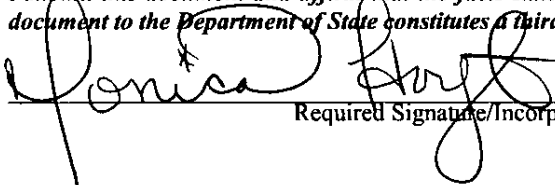


Required Signature/Registered Agent

07/28/2013

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

07/28/2013

Date