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(Requestor's Name)				
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(City/State/Zip/Phone #)				
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(Document Number)				
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COVER LETTER

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

SUBJECT: KOI	MPANY JEWELS	S CO.	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>ÚDĒ SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the ar	ticles 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
		ADDITIONAL CO	PY REQUIRED
FROM: K	aylee Rodriguez		
18	Nam 3003 NW 87 PL <i>A</i>	e (Printed or typed) ACE	
		Address	
HrA	Leaн , FL 33018		

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

City, State & Zip

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

KAYLEE0216@HOTMAIL.COM

786-501-6355

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

<u>18003 NW 8</u>	RINCIPAL OFFICE Principal street address 7 PLACE	Mailing ad	dress, if different is:
rleah, FL 3	3018		
ARTICLE III PU	THE COMPAN the corporation is organized is:	Y WILL BE SELLING HANDMADE ACCE	ESSORIES VIA ONLINE TO CUSTOMERS
			610
			7 7
ARTICLE IV SI			4 FEB - 7 AH
ARTICLE V IN	IITIAL OFFICERS AND/OR DIRECTO		4 FEB -7 AH 9:
ARTICLE V IN Name and Ti	IITIAL OFFICERS AND/OR DIRECTO	Name and Title:	4 FEB -7 AH 9:
ARTICLE V IN	IITIAL OFFICERS AND/OR DIRECTO		4 FEB -7 AH 9:
ARTICLE V IN Name and Ti Address	PRESIDENT KAYLEE RODRIGUEZ 18003 NW 87 PLACE	Name and Title:Address:	4 FEB - 7 AH 9: 49
ARTICLE V IN Name and Ti Address	HITIAL OFFICERS AND/OR DIRECTO MILLE: PRESIDENT KAYLEE RODRIGUEZ 18003 NW 87 PLACE HIALEAL, FL 33018	Name and Title: Address: Name and Title: Address:	4 FEB - 7 AH SHIGH
Name and Ti Address Name and Tit	HTIAL OFFICERS AND/OR DIRECTO HILL: PRESIDENT KAYLEE RODRIGUEZ 18003 NW 87 PLACE HIALEAL, FL 33018	Name and Title: Address: Name and Title: Address:	4 FEB - 7 AN 9: 49
Name and Ti Address Name and Tit Address	HTIAL OFFICERS AND/OR DIRECTO GILLE: PRESIDENT KAYLEE RODRIGUEZ 18003 NW 87 PLACE HIALLAL, FL 33018 ILE:	Name and Title: Address: Name and Title: Address:	4 FEB - 7 AH 9: 49

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acce	·
Name: KAYLEE RODRIGUEZ	
Address: 18003 NW 87 PLACE	
Healah, FL 33018	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	<u>ම්රා</u> මරා ම
Name: KAYLEE RODRIGUE	<u>Z</u>
Address: 18003 NW 87 PLAC	E
Hialah, FL 33018	
Having been named as registered agent to accept service of this certificate, I am familiar with and accept the appointment	of process for the above stated corporation at the place designated in ent as registered agent and agree to act in this capacity
Kayloe Rods	12/03/2014
Required Signature/Registered A	gent Date
I submit this document and affirm that the facts stated he document to the Department of State constitutes a third deg	erein are true. I am aware that the false information submitted in a tree felony as provided for in s.817.155, F.S.
Kaylee Modni	CSUR 02/03/2014
Required Signature/Incorporate	Date