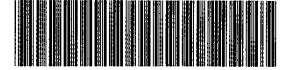
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(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only

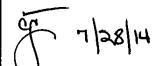


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FILED

SECRETARY OF STATE



COVER LETTER

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

SUBJECT:	BOUT	IQUE	ON 1	THE (GO,	INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status

ARTRAVIA JOHNSON/TSEGA MULU

Name (Printed or typed)

829 NW 119 STREET

Address

NORTH MIAMI, FL 33168

City, State & Zip

(786)370-7057

Daytime Telephone number

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

HAT THE TO BE THE PROCESS OF BUILDING ON WELL CONTROL STORE

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

MY NAME IS ARTRAVIA E. JOHNSON. AS THE PRESIDENT OF BOUTIQUE ON THE GO, I WOULD LIKE TO REPORT THE UNATHORIZED USE OF MY BUSINESS NAME AND USE OF MY PERSONAL INFORMATION TO FORM A CORPORATION ON SUNBIZ. THE DOCUMENT NUMBER FOR THE UNATHORIZED ARTICLES OF INCORPORATION IS P13000014837. AFTER VISITING MY ACCOUNANT AND RUNNING A SEARCH OF THE NAME, MY ACCOUNTANT ADVISED ME WHAT OCCURRED. I INFORMED THAT I CREATED A FICTICOUS NAME ONLY. I FILED A VOLUNTARY DISSOLUTION ON 7/18/2014 AFTER SPEAKING WITH A STATE OF FLORIDA REPRESENTATIVE AND MY ACCOUNT. ALONG WITH THE ARTICLES OF INCORPORATAION, I WAS THEN ADVISED TO WRITE THIS LETTER TO RELEASE THE NAME SO THAT I COULD REUSE IT AND INCORPORATE MY BUSINESS.

IN ADDITION, AS THE PRESIDENT OF BOUTIQUE ON THE GO, I AM AUTHORIZING TSEGA MULU AS MY EQUAL PARTNER. I WOULD LIKE FOR BOTH OF US TO BE LISTED AS PRESIDENTS AND EQUAL PARTNERS ON SUNBIZ.ORG AND ANY OTHER SUPPORTING DOCUMENTS THERE MAY BE.

ARTRAVIA JOHNSON

OWNER OF BOUTIQUE ON THE GO

829 NW 119TH STREET

NORTH MIAMI, FL 33168

14 JUL 25 PM 4: 41
SECRETARY OF STATE

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

4: 41

ARTICLE I NAI	ME htion shall be: BOUTIQUE ON TI	HE GO IN	IC FILED
	Principal street address H STREET		14 JUL 25 PM 4: Mailing address, if differentis: TARY OF STATALLAHASSEE, FLOR
	POSE the corporation is organized is: ANY AN	ND ALL LA	AWFUL BUSINESS.
The number of shares of	NRES stock is: 100		
Name and Title	ARTRAVIA IOHNSON/PRESIDENTY	Name and Title	TSEGA MULU(PRESIDENT)
Address	829 NW 119TH STREET	Address:	829 NW 119TH STREET
Audiess .	NORTH MIAMI, FL 33168	Address.	NORTH MIAMI, FL 33168
Name and Title		Name and Title	:
Address		Address:	
Address		Address:	

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	ARTRAVIA JOHNSON	the registered agent is:	
Address:	829 NW 119TH STREET		
	NORTH MIAMI, FL 33168		
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	ARTRAVIA JOHNSON		
Address:	829 NW 119TH STREET		
	NORTH MIAMI, FL 33168		
	ned as registered agent to accept service of process in familiar with and accept the appointment as reg		
//st		~	07/19/2014
— Con	Required Signature/Registered Agent	,	Date
	ument and affirm that the facts stated herein are to Department of State constitutes a third degree felony		
/lst			07/19/2014
	Required Signature/Incorporator		Date
			~ 4