

PIS 000068434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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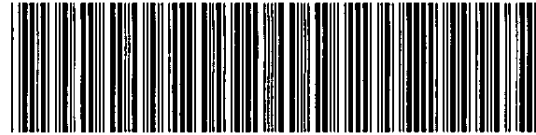
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 AUG 11 PM 12:17

8/11/15 CR

COVER LETTER

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

SUBJECT: LUXMARIE, INC
(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
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 COPY REQUIRED

FROM: Melissa Concepcion
Name (Printed or typed)
9240 S.W. 178th Terrace
Address
Palmetto Bay, FL 33157
City, State & Zip
(305) 965-3727
Daytime Telephone number
melissa@luxe knows.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:

LUXMARIE, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9240 SW 178 Terrace
Palmetto Bay, FL 33157

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to engage in any lawful
activity for which corporations may be incorporated
in this state.

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TALLAHASSEE, FLORIDA
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ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Melissa Concepcion, President

Address

9240 SW 178 Terrace
Palmetto Bay, FL 33157

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Melissa Concepcion
Address: 9240 SW 178 terrace
Palmetto Bay, FL 33157

ARTICLE VII INCORPORATOR

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

Name: Melissa Concepcion
Address: 9240 SW 178 terrace
Palmetto Bay, FL 33157


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)


Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

08/05/2015
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

08/05/2015
Date