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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : M. BURR KEIM COMPANY
Account Number : I19990000242
Phone : (215)563-8113
Fax Number : (215)977-9386

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

15 AUG 27 PM 2:00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION
PASSION TRADING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$70.00

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8/27/2015

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: PASSION TRADING, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
2960 SOLANO AVE. #303	
COOPER CITY, FL 33024	

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
WHOLESALE - BEAUTY SUPPLIES

ARTICLE IV SHARES
The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CHRISTINA J. LEE, PRESIDENT
Address: 2960 SOLANO AVE. #303
COOPER CITY, FL 33024

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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TALLAHASSEE, FLORIDA

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: CHRISTINA J. LEE

Address: 2960 SOLANO AVE. #303

COOPER CITY, FL 33024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CHRISTINA J. LEE

Address: 2960 SOLANO AVE. #303

COOPER CITY, FL 33024

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TALLAHASSEE, FLORIDA

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

X _____ 8/12/15

Required Signature/Registered Agent 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.

X _____ 8/12/15

Required Signature/Incorporator Date