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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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FLORIDA PROFIT/NON PROFIT CORPORATION LEO & CAMILLE INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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15 SEP 28 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 SEP 28 PM 4:48

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)**ARTICLE I NAME:** The name of the corporation is:LEO + Camille Inc.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

12401 S.W. 99 ST.
MIAMI FL 33186**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Sandra Rodriguez VP
Rossana Velasquez P**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Sandra Rodriguez
12401 S.W. 99 ST
Miami FL 33186**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Sandra Rodriguez
12401 S.W. 99 ST
Miami FL 33186SHRE/201105/5
TALLAHASSEE, FL 32301

15 SEP 28 PM 2:37

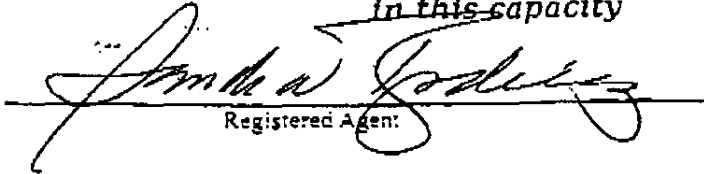
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Required Signatures:

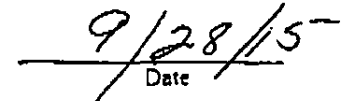
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


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.


Incorporator


Date

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