

P/5000/102036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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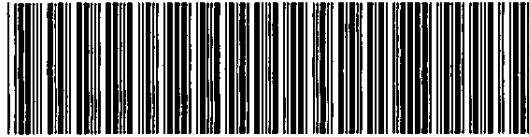
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/16/15--01030--005 **87.50

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 NOV 16 AM 11:44

DEC 30 2015

T CANNON

EFFECTIVE DATE
Dec 16, 2015

COVER LETTER

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

SUBJECT: FINESE BOUTIQUE 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: ANDREA FACEY

Name (Printed or typed)

25 N STATE 7

Address

PLANTATION, FLORIDA 33317

City, State & Zip

954 514 7377

Daytime Telephone number

finesseboutique3@gmail.com

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 1, 2015

ANDREA FACEY
25 N STATE 7
PLANTATION, FL 33317 US

SUBJECT: FINESE BOUTIQUE
Ref. Number: W15000077549

RECEIVED
15 DEC 30 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for FINESE BOUTIQUE and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tina D Cannon
Regulatory Specialist II

Letter Number: 815A00025135

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: FINESE BOUTIQUE INC.

15 NOV 16 AM 11:44

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

25 N STATE RD 7

PLANTATION, FL. 33317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of transacting any and all lawful business in the state of Florida, which includes but is not limited to the Retail of Women's Apparel etc.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANDREA FACEY, PRESIDENT

Name and Title: _____

Address 4866 NW 1st ST.

Address: _____

PLANTATION

FLORIDA 33317

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: ANDREA FACEY
Address: 4866 NW 1st ST
FT LAUDERDALE, FL. 33317

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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ARTICLE VII INCORPORATOR

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

Name: CLOVER BRODERICK-STRAKER
Address: 3850 JACKSON BLVD
FT. LAUDERDALE, FL. 33312

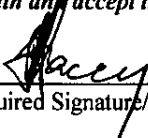
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 12/16/2015 (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

12/10/2015

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

12/10/2015

Date