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Florida Department of State
Division of Corporations
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Division of Corporations
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Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
HAUTE SARAH, INC.

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

104830

Please file on the effective date. 1/1/16 Thank you

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Corporate Filing Menu

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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 shall be: Haute Sarah, Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address: 340 W. Flagler Street
Suite 209
Miami, Florida 33130

Mailing address, if different is: _____

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES
The number of shares of stock is: 1000 @ \$.001 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Sarah Mirmell, P, VP, Treas, Secy</u>	Name and Title:	_____
Address	<u>340 W. Flagler Street</u>	Address:	_____
	<u>Suite 209</u>		_____
	<u>Miami, Florida 33130</u>		_____

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

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

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16 JAN -6 AM 5:19
CLERK OF DISTRICT COURT
MIAMI, 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: SARAH MIRMELLI
 Address: 340 W. Flagler Street, Suite 209
Miami, Florida 33130

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Sarah Mirmelli
 Address: 340 W. Flagler Street, Suite 209
Miami, Florida 33130

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: January 1, 2016 (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

Jan - 2016
 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.817.153, F.S.

 (Required Signature/Incorporator)

Jan - 5 - 16
 Date