P160014611

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					

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COVER LETTER

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

SUBJECT:	r Love Co.		
SUBJECT.	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d a check for:
\$70.00	\$78.75	\$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
J	& Certificate of Status	& Certified Copy	Certified Copy & Certificate o Status
		ADDITIONAL COPY REQ	
FROM:	senia Gonzalez		
FROM:	Nam	e (Printed or typed)	·····
134	30 SW 25 ST		
		Address	
Mia	mi, FL 33175		
	City	, State & Zip	
305	-609-6469		
_	Daytime 7	Telephone number	
adm	in@threeforlove.com		
	E-mail address: (to be use	ed 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)

The name of the corpora			
ARTICLE II PRIN	CIPAL OFFICE Principal street address	Mailing address,	if different is:
13430 SW 25 ST			
Miami, FL 33175			
ARTICLE III PURP The purpose for which	OSE the corporation is organized is:	othes/accessories	
			6 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
ARTICLE IV SHAR The number of shares o	RES 100 f stock is: AL OFFICERS AND/OR DIRECTOR		PH 12: 00
Name and Tit	W : G 1 /B :1		
Address	13430 SW 25 ST	Name and Title: Address:	
	MIAMI, FL 33175		
Name and Title	e:	Name and Title:	
Address		Address:	
Name and Titl	e:	Name and Title:	
Address			

Name an	id title:	Name and Title:	
Address	3	Address:	
			
ARTICI F VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptab	le) of the registered agent is:	
Name:	Yesenia Gonzalez		
Address:	13430 SW 25 ST		
	MIAMI, FL 33175		
ARTICLE VII	INCORPORATOR		
	ddress of the Incorporator is:		
Name:	Yesenia Gonzalez		•
Address:	13430 SW 25 ST		:
	MIAMI, FL 33175		
			
ARTICLE VIII	EFFECTIVE DATE: 01/26/2016	(O.D.T.O.)	
	other than the date of filing: date is listed, the date must be specific and ciling.)	. (OPTIO) annot be more than five be	
	e inserted in this block does not meet the applie effective date on the Department of State's reco		ments, this date will not be listed as
	med as registered agent to accept service of pr am familiar with and accept the appointment		
•	4900		01/27/16
············	Required Signature/Registered Agen		Date
I submit this do	cument and affirm that the facts stated herein	are true. I am aware that	the false information submitted in
document to the	Department of State constitutes a third degree	jetony as provided for in s.8	01/27/16
Dagu	ired Signature/Incorporator		Date