P16000027258

(Requ	estor's Name)	<u> </u>	
(Addre	ess)	- The same of the	
(Addre	ess)		
(City/S	State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
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SECRETARY OF STATE

FILED
AR 25 AH 8: 02
VETARY OF STATE

144

COVER LETTER

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

SUBJECT:	BILLIONAIRE BABES, INC.				
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation an	d a check for:		
□ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certified Copy & Certificate of Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:	ROCIO CRESPO HATHORI Nam	N e (Printed or typed)			
	6000 INDIAN CREEK DRIVE, #901				
	Address				
	MIAMI BEACH, FL 33140				
	City,	, State & Zip			
	(305) 794-1622				
	•	Celephone number			
	ro43sie@gmail.com	d for fitting amount	notification)		
	E-maii address: (to be use	d for future annual report	notification)		

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



February 16, 2016

ROCIO CRESPO HATHORN 6000 INDIAN CREEK DRIVE, #901 MIAMI BEACH, FL 33140

SUBJECT: BILLIONAIRE BABES, INC.

Ref. Number: W16000011526

We have received your document for BILLIONAIRE BABES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 416A00003190

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

FILED

RTICLE I NAMI he name of the corpor		C. 16 HAR 25 AM 8: 02
RTICLE II PRIN		SECRETARY OF STATE FALL AHASSEE FLORIDA Mailing address, if different is:
000 INDIAN CREEK	DRIVE, #901	
IIAMI BEACH, FL 3	3140	
	the corporation is organized is:	AGE IN THE AQUISTION (PURCHASE) AND
F FLORIDA.		
		share
ne number of shares o RTICLE V INITI Name and Titl	f stock is: AL OFFICERS AND/OR DIRECTORS e: ROCIO CRESPO HATHORN, P/D	Name and Title:
ne number of shares o	f stock is: AL OFFICERS AND/OR DIRECTORS	
ne number of shares o RTICLE V INITI Name and Titl Address	f stock is: AL OFFICERS AND/OR DIRECTORS ROCIO CRESPO HATHORN, P/D 6000 INDIAN CREEK DRIVE, #901 MIAMI BEACH, FL 33140 MONICA L. LAFUENTE, VP/D	Name and Title: Address:
ne number of shares o RTICLE V INITI Name and Titl Address Name and Title	f stock is: AL OFFICERS AND/OR DIRECTORS ROCIO CRESPO HATHORN, P/D 6000 INDIAN CREEK DRIVE, #901 MIAMI BEACH, FL 33140 MONICA L. LAFUENTE, VP/D	Name and Title: Address: Name and Title:
RTICLE V INITI Name and Titl Address	f stock is: AL OFFICERS AND/OR DIRECTORS ROCIO CRESPO HATHORN, P/D 6000 INDIAN CREEK DRIVE, #901 MIAMI BEACH, FL 33140 MONICA L. LAFUENTE, VP/D	Name and Title: Address:
ne number of shares o RTICLE V INITI Name and Titl Address Name and Title	f stock is: AL OFFICERS AND/OR DIRECTORS e: ROCIO CRESPO HATHORN, P/D 6000 INDIAN CREEK DRIVE, #901 MIAMI BEACH, FL 33140 MONICA L. LAFUENTE, VP/D 1222 NE 18TH AVENUE, #1	Name and Title: Address: Name and Title:
he number of shares o RTICLE V INITI Name and Titl Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS E: ROCIÓ CRESPO HATHORN, P/D 6000 INDIAN CREEK DRIVE, #901 MIAMI BEACH, FL 33140 MONICA L. LAFUENTE, VP/D 1222 NE 18TH AVENUE, #1 FT. LAUDERDALE, FL 33304-2445	Name and Title: Address: Name and Title: Address:
Name and Title Address Name and Title	f stock is: AL OFFICERS AND/OR DIRECTORS ROCIÓ CRESPO HATHORN, P/D 6000 INDIAN CREEK DRIVE, #901 MIAMI BEACH, FL 33140 MONICA L. LAFUENTE, VP/D 1222 NE 18TH AVENUE, #1 FT. LAUDERDALE, FL 33304-2445 CAMILA LAGUADO, S/D 336 NE 85TH STREET	Name and Title: Address: Name and Title:

Name	and Title:	Name and Title:_	FILED		
Addr		_ Address: _	16 MAR 25 AM 8: 02		
			SECRETARY OF STATE FALLAHASSEE FLORIDA		
		-	HELAHASSEE FLORIDA		
		_			
/ D					
	<u>REGISTERED AGENT</u> 1 Florida street address (P.O. Box NOT acceptable) o	f the registered agen	it is:		
Name:	MONICA L. LAFUENTE				
Address:	1222 NE 18TH AVENUE, #1	-			
· iddioss.	FT. LAUDERDALE, FL 33304-2445	-			
		-			
ARTICLE VI	I INCORPORATOR				
The name and	d address of the Incorporator is:				
Name:	ROCIO CRESPO HATHORN	_			
Address:	6000 INDIAN CREEK DRIVE, #901	_			
	MIAMI BEACH, FL 33140	_			
ARTICLE VI	II EFFECTIVE DATE:	(0.70			
(If an effective days after the	, if other than the date of filing:e date is listed, the date must be specific and cannot e filing.)	t be more than fiv	HONAL) e business days prior or 90 business		
	late inserted in this block does not meet the applicable is effective date on the Department of State's records.	statutory filing requ	uirements, this date will not be listed as		
	named as registered agent to accept service of process , I am familiar with and accept the appointment as rej				
20	Required Signature/Registered Agent		1/29/16 Date		
I submit this	document and affirm that the facts stated herein are	true. I am aware t	hat 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.					
let	Lethour		D1/79/14.		
Re	quired Signature/Incorporator	· · · · · · · · · · · · · · · · · · ·	Date		