P16000039501

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
BOUTIQUE VALAU, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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May 5, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: BOUTIQUE VALAU, INC.
REF: W16000033001

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document accordingly.

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

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Teresa Brown
Regulatory Specialist II

FAX Aud. #: H16000111309
Letter Number: 716A00009389

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TALLAHASSEE, FLORIDA

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: BOUTIQUE VALAU, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
14907 SW 80TH STREET APT #219	14907 SW 80TH STREET APT #219
MIAMI, FLORIDA 33193	MIAMI, FLORIDA 33193

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	ENIO J. CUBILLO RAMIREZ (P)	Name and Title:	STEPHANIE M. ALVARADO (D)
Address	ALAJUELA, LA GUACIMA, DEL SUPER	Address:	14907 SW 80TH STREET
	LA CANASTICA 125M ESTE, 50 SUR.		APT #219
	RESIDENCIAL INDIGO, CASA 2B		MIAMI, FLORIDA 33193
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

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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: One Stop Solution Bookkeeping & Accounting Services, Inc.

Address: 12030 SW 129TH COURT SUITE 104

MIAMI, FLORIDA 33186

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: STEPHANIE M. ALVARADO

Address: 14907 SW 80TH STREET APT# 219

MIAMI, FLORIDA 33193

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

_____ 5/3/2016

Required Signature of 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.

_____ 5/3/2016

Required Signature: Incorporator Date