P1600047498

(Re	equestor's Name)	
(Ac	dress)	
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(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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Office Use Only



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SECRETARY OF STATE TALLATIONS OF STATE ORIDA

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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2016

DIANA ZARAGOZA 2260 PALM BEACH LAKES WEST PALM BEACH, FL 33409

SUBJECT: U ECO SHOES Ref. Number: W16000033101 SECRETARY OF STATE TALLAHASSEE, FLORIDA-

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

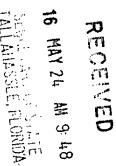
The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Matthew T Moon Regulatory Specialist II

Letter Number: 316A00009452



COVER LETTER

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

SUBJECT:	U ECO S	11062	- ECO SHO	ο € S
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
Enclosed are an o	riginal and one (1) copy of the arti	icles of incorporation and	1 a check for:	I
S70.00 Filing Fee	• 1 1 1	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: _	DIZNZ ZZRZGOZG Name	(Printed or typed)	16 MAY	SECR!
	2260 Palm beach	rakes	24	TICE TASSE
_	A	Address	A A	무당
-	West palm beach	FL, 33409 State & Zip	6: 08	TATE
	561-480-53°	•		
_	Daytime T	elephone number		
_	dizaragoza @ gn			
	E-mail address: (to be used	d for future annual report r	notification)	

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

ARTICLES OF INCORPORATION
In compliance with Chapter 407 and/or Chapter 621, F.S. (Profit)

The name of the corpora	tion shall be: V ECO	SHOES INC	
ARTICLE II PRINC	CIPAL OFFICE Principal street address	Mailing add	ress, if different is:
2260 PZLM	BEACH LAKES		
Blvd svite 2	12 ,WPBR33409		
ARTICLE III PURPO The purpose for which t	OSE the corporation is organized is:	sell shoes	
			SE TAL
ARTICLE IV SHAR. The number of shares of ARTICLE V INITIA		2.5	RY OF STATE RY OF STATE 24 AH 6: 08
	: Digna zaragozá-pr		
Address	299 NW 52Nd TOF		
	#319 BOC2 R210A	<u></u>	
	PL 33487 .		
Name and Title	Natalia Zaragoza ir	ICE ESICEM Name and Title:	
Address	299 NW S2d 18112	2.60	
	# 319 60C3 R3TON		
	FL 38487 ·		
Name and Title	;	Name and Title:	
Address	·	Address:	

Name a	nd Title:	Name and Title:	
Address		Address:	
	REGISTERED AGENT Porida street address (P.O. Box NOT acceptable こうですっこら DI ZN 3 ZARASO2A	e) of the registered agent is:	
Address:	299 NW S2ND TETTE CO		d
	#319 BOCG RATION	<u>3</u> 5487	SEORE ALLAL 16 MA
ARTICLE VII	<u>INCORPORATOR</u>		TARY TARY TASSE
The name and a	address of the Incorporator is:		3 795
Name:	DIGNG ZOIGGOZG		STATE LORIE 6: 08
Address:	299 NW 52nd 78(10	ì4	S DE
	\$19 - BOCZ ROTON FL	33407	
ARTICLE VIII	EFFECTIVE DATE: f other than the date of filing: APRIL 22 1/2 date is listed, the date must be specific and can iling.)	not be more than five busines	
(If an effective days after the factor) Note: If the da	e inserted in this block does not meet the applicable effective date on the Department of State's record		this date will not be risted
(If an effective days after the to Mote: If the da the document's Having been no	effective date on the Department of State's record med as registered agent to accept service of proc am familiar with and accept the appointment as	ds. cess for the above stated corpora registered agent and agree to ac	ition at the place designate t in this capacity
(If an effective days after the to Mote: If the da the document's Having been no	effective date on the Department of State's record med as registered agent to accept service of proc am familiar with and accept the appointment as	ds. cess for the above stated corpora registered agent and agree to ac	ition at the place designate t in this capacity
(If an effective days after the to Mote: If the da the document's Having been not this certificate, and I submit this do	effective date on the Department of State's record amed as registered agent to accept service of process am familiar with and accept the appointment as Required Signature/Registered Agent cument and affirm that the facts stated herein a	ds. cess for the above stated corpora registered agent and agree to ac are true. I am aware that the fa	tion at the place designate in this capacity O4) Z 1) 26 Date Date information submitted
(If an effective days after the factor of the days after the factor of the days after the days a	effective date on the Department of State's record amed as registered agent to accept service of process am familiar with and accept the appointment as Required Signature/Registered Agent	ds. cess for the above stated corpora registered agent and agree to ac are true. I am aware that the fa	tion at the place designate in this capacity O4) Z 1) 26 Date Date information submitted