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P. 001/003

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
VONSHAE BEAUTY INC

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

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TALLAHASSEE, FLORIDA

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STATE OF FLORIDA
DIVISION OF CORPORATIONS

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FAX No.

P. 002/003

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: VONSHAE BEAUTY INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1500 S OCEAN DRIVE APT 12C

HOLLYWOOD BEACH, FL 33019

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE CORPORATION IS ORGANIZED TO SALE GOODS
SUCH AS BEAUTY PRODUCTS, SHOES, CLOTHING AND ACCBSSORIES.

ARTICLE IV SHARES

SHARES: 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAVISHA MOORE (P)

Name and Title: _____

Address 1500 OCEAN DRIVE

Address: _____

APT 12C

HOLLYWOOD BEACH, FL 33019

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

16 JUN 17 AM 11:30

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: DAVISHA MOORE
Address: 1500 S OCEAN DRIVE APT 12C
HOLLYWOOD BEACH, FL 33019

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DAVISHA MOORE
Address: 1500 S OCEAN DRIVE APT 12C
HOLLYWOOD BEACH, FL 33019

ARTICLE VIII EFFECTIVE DATE:

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

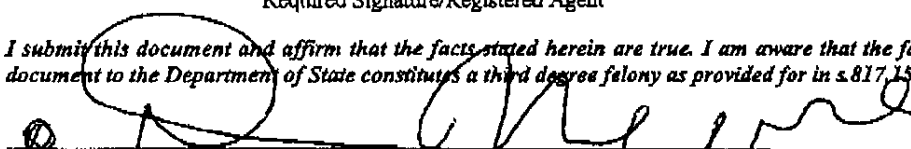
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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

 _____ 06/15/2016
Required Signature/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.

 _____ 06/15/2016
Required Signature/Incorporator Date

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS