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COVER LETTER

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

SUBJECT: IDEAL	STYLES INC				
SOBJECT.	(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 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:	RISTOPHER BUCKNOR Nam	e (Printed or typed)			
826	N.W. 98 AVENUE				
Address					
PL	PLANTATION, FL. 33324				
	City, State & Zip				
954	-805-7926				
	Daytime Telephone number				
cini	je@yahoo.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)

ARTICLE I NAME	ion shall be:	FILEU	
		2016 AUG 2.9 AM 8:	45
ARTICLE II PRINC	<u>CIPAL OFFICE</u> Principal <u>street</u> address	Mailing address lift different is: UF ST/	.15
826 N.W. 98 Avenue	Timelpal street address	Same as above. TALLAHASSEE, FLOI	<u>`ii</u> Ö.
Plantation, Fl. 33324		19	
			_
ARTICLE III PURPO The purpose for which t	DSE he corporation is organized is:	Merchandising.	
(DECOLO 11)	no.		
The number of shares of	stock is: 500 Shares at \$1.00 per share.		
	AL OFFICERS AND/OR DIRECTORS		
Name and Title	Christopher Bucknor - President.	Name and Title:	
Address	826 N.W. 98 Avenue	Address:	
Address	Plantation, FL. 33324	Address.	
			_
Name and Title		Name and Title:	_
Address		Address:	—
		<u> </u>	_
			_
Name and Title	:	Name and Title:	_
Address		Address:	

Name and Title:Address		FILEU Name and Title:	
		2016 AUG 29 AM 8: 45	
		SELECTION OF STATE TALL AMASSEE FLORIDA	
		LIP COMING	
ADTICLEAG	BECIGTERED ACENT		
ARTICLE VI The name and l	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable)	e) of the registered agent is:	
Name:	Charles Inije		
Address:	1175 N.E. 125th Street suite 306		
	Miami, FL. 33161.		
ADTICLE VII	INCORPOR ATOR		
	<u>INCORPORATOR</u>		
The <u>name and a</u>	address of the Incorporator is:		
Name:	Christopher Bucknor		
Address:	826N, W. 98 Avenue		
	Plantation, FL. 33324	<u> </u>	
1 D T 1 C 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1			
Effective date, i	I EFFECTIVE DATE: If other than the date of filing:	(OPTIONAL)	
(If an effective days after the		nnot be more than five business days prior or 90 business	
-	- ·	ble statutory filing requirements, this date will not be listed as	
	effective date on the Department of State's recor		
Having been no	amed as registered agent to accept service of pro	cess for the above stated corporation at the place designated in	
this certificate, i	I am familiar with affi accept the appointment as	registered agent and agree to act in this capacity	
		08/24/2016	
	Required Signature Registered Agent	Date	
	ocument and affirm that the facts stated herein Department of State constitutes a third degree f	are true. I am aware that the false information submitted in a elony as provided for in s.817.155, F.S.	
14	Sufferen	08/24/2016	
Req	uired Signature/Incorporator	Date	