

P16000081215

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

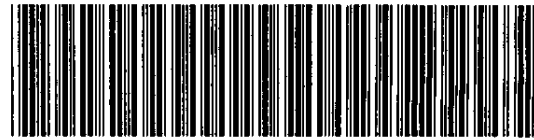
Special Instructions to Filing Officer:

Office Use Only

W16000081215

OCT 06 2016

T. SCOTT



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09/13/16--01004--024 **78.75

16 OCT -5 AM EDT 00

COVER LETTER

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

SUBJECT: BR FASHION STUDIO INT'L, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED

FROM: BARBARA RAMOS.
Name (Printed or typed)

1780 RIDGEWOOD AVE
Address

MAITLAND FL. 32751
City, State & Zip

(407) 218-1069 or (305) 333-5343
Daytime Telephone number

CUSTOM BIKINIS@BARBARARAMOS.COM
E-mail address: (to be used 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

The name of the corporation shall be: BR Fashion Studio INT'L, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1780 RIDGEWOOD AVE

MAITLAND, FL. 32751

P.O. Box: 402982

MIAMI BEACH, FL. 33140.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Sales

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Barbara Ramos -President

Name and Title: _____

Address P.O BOX 402982

Address: _____

Miami Beach, FL 33140

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

16 OCT - 5 AM '08

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: Barbara Ramos

Address: 1780 RIDGEWOOD AVE
MAITLAND, FL 32751

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Barbara Ramos
Address: 1780 RIDGEWOOD AVE
MAITLAND, FL 32751

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

[Signature]

Required Signature/Registered Agent

9/2/2016

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.

[Signature]

Required Signature/Incorporator

9/2/2016

Date