## P17000007028

(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	<del>;</del> #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					





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PALLYHASSES FLORES

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## **COVER LETTER**

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

SUBJECT: I A	M GR	ACE AND GUIDANCE INCORP	ORATED		
SUBJECT:	<del></del>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an	origi	nal and one (1) copy of the an	ticles of incorporation and	i a check for:	
☐ \$70.00 Filing Fed		\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
			ADDITIONAL CO	PY REQUIRED	
FROM:	Maria Elena Alvarez  Name (Printed or typed)  14948 sw 53 lane				
			Address	· · · · · · · · · · · · · · · · · · ·	
	Miar	ni, Florida 33185			
		City	, State & Zip		
	305	401-6038			
	Daytime Telephone number				
	mari	lyn_21@yahoo.com			
		E-mail address: (to be use	d for future annual report	notification)	

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 28, 2016

MARIA ELENA ALVAREZ 14948 SW 53 LANE MIAMI, FL 33185

SUBJECT: I AM GRACE AND GUIDANCE INCORPORATED

Ref. Number: W16000086447

We have received your document for I AM GRACE AND GUIDANCE INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 816A00027597

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

name of the corporation shall be:    I AM GRACE AND GUII   I AM GRACE AND GUIII   I A		lailing address, if different is:
48 sw 53 Lane, Miami Florida 33185		
TICLE III PURPOSE purpose for which the corporation is organized is: sonal attire and jewelry.	ribute and manufacture a	
Name and Title:	Name and Title:	Arcadia Maria Alvarez (Executive Vice President)
number of shares of stock is:	Name and Title:	
Name and Title:	Name and Title:	Vice President)
Name and Title:  Address	Name and Title:  Address:  Name and Title:  Address:  Address:	Vice President)  2017 JAN 20 PM 5:
Name and Title:  Name and Title:  Address  Name and Title:	Name and Title:  Address:  Name and Title:  Address:	Vice President)  2017 JAN 20 PM 5:

Name	A Tid.	FILED
Name a	and Title:	Name and Title: 2017 JAN 20 PM 5: 10
Addre	ss	
		BALL MARGON STATE
		SO THE SELE, FLORIDA
ARTICLE VI The name and	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	Maria Elena Alvarez	or are regionaled agent is.
Address:	14948 sw 53 Lane	<del></del>
	Miami, Florida 33185	
ARTICLE VII	<u>INCORPORATOR</u>	
The name and	address of the Incorporator is:	
Name:	Maria Elena Alvarez	
Address:	14948 sw 53 Lane	<u> </u>
	Miami, Florida 33185	<del></del>
AKTICLE VIII Effective date.	I EFFECTIVE DATE: if other than the date of filing:	(OPTIONAL)
		not be more than five days prior or 90 days after the
	te inserted in this block does not meet the applicate effective date on the Department of State's record	ole statutory filing requirements, this date will not be listed as s.
	amed as registered agent to accept service of proc I am familiar with and accept the appointment as	ess for the above stated corporation at the place designated in registered agent and agree to act in this capacity
<i>a</i> 1	A	\ _ \ ~ _ \ \
———	Required Signature/Registered Agent	1 - 15 - 19 Date
		re true. I am aware that the false information submitted in a
document to the	e Department of State constitutes a third degree fe	lony as provided for in s.817.155, F.S.
<u> </u>	Jour Elen Alvora uited Signature/Incorporator	1-15-17 Date
Req	uited Signature/Incorporator	Date