

P20000086415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP



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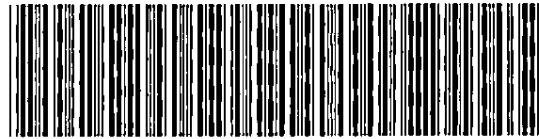
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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D. O'KEEFE

NOV 06 2020

# COVER LETTER

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

SUBJECT: Kouch Couture Boutique 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: BRIELLE E. Corbett  
Name (Printed or typed)

33 Rudolph Lane  
Address

Martinezville FLORIDA 32344  
City, State & Zip

904-885-5336  
Daytime Telephone number

House Couture @ KouchCouture.com  
E-mail address: (to be used for future annual report notification)

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

RECEIVED  
20 NOV -6 PM 2:17  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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: Kruch Couture Boutique Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

33 Rudolph Lane  
Monticello, FL 32344

Mailing address, if different is:

33 Rudolph Lane  
Monticello, FL 32344

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Online Boutique for  
Comfortable and Casual Clothing

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BRIELLE Corbett CEO

Address: 33 Rudolph Lane  
Monticello, FL  
32344

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: JAMES Corbett COO

Address: 33 Rudolph Lane  
Monticello, FL  
32344

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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CLERK OF CIRCUIT COURT  
JANUARY 1, 2021  
MONTICELLO, FLORIDA

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: BRIELLE CORBETT

Address: 33 RUDOLPH LANE  
MONTICELLO, FL 32344

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: BRIELLE CORBETT

Address: 33 RUDOLPH LANE  
MONTICELLO, FL 32344

**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 days prior or 90 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*

Brielle Corbett  
Required Signature/Registered Agent

11/6/20  
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.*

Brielle Corbett  
Required Signature/Incorporator

11/6/20  
Date

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