

P21000005318

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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H210000345933ABC.

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : AVA FINANCIAL CONSULTANTS INC
Account Number : I20170000094
Phone : (954)842-1979
Fax Number : (954)905-4315

2021 Jun 26 PM 6:57

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: IVINXE2@GMAIL.COM

FLORIDA PROFIT/NON PROFIT CORPORATION X'S VARIETY STORE INC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

2021 Jun 26 PM 12:29

COVER LETTER

H210000345933

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

SUBJECT: X'S VARIETY STORE 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: DUDLE FILS-AIME

Name (Printed or typed)

7220 PLANTATION BLVD

Address

MIRAMAR, FL 33023

City, State & Zip

786-370-1258

Daytime Telephone number

ivinxe2@gmail.com

E-mail address: (to be used for future annual report notification)

2021 Jan 20 11:16:51

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

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ARTICLES OF INCORPORATION H210000345933
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: X'S VARIETY STORE INC

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

14671 NE 6TH AVE

7220 PLANTATION BLVD

MIAMI, FL 33161

MIRAMAR, FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1,000 SHARES AT \$1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DUDLE FILS-AIME - PDTS

Name and Title: _____

Address: 7220 PLANTATION BLVD

Address: _____

MIRAMAR, FL 33023

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

H21000034 5933

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Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: _____

DUDLE FILS-AIME

Address: _____

7220 PLANTATION BLVD

MIRAMAR, FL 33023

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: _____

DUDLE FILS-AIME

Address: _____

7220 PLANTATION BLVD

MIRAMAR, FL 33023

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*X Dudle Fils-Aime

Required Signature/Registered Agent

01/25/2021

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.*X Dudle Fils-Aime

Required Signature/Incorporator

01/25/2021

Date