

P210003135013

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 07535000353
Phone : (800)221-2972
Fax Number : (917)243-5843

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

YouGotStyle Central, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

AUG 23 2021

T. SCOTT

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: YouGotStyle Central, Inc.

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

45 Tamarac Ave

45 Tamarac Ave

Ponte Vedra, FL 32081

Ponte Vedra, FL 32081

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any lawful act or activity for which corporations may be organized.

ARTICLE IV SHARES

The number of shares of stock is: 1000 WITH 0.01 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shirley W Wong, President

Name and Title:

Address 45 Tamarac Ave

Address:

Ponte Vedra, FL 32081

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2021 AUG 20 AM 10:18
 FILED
 CLERK OF DISTRICT COURT
 1ST DISTRICT
 JACKSONVILLE, FLORIDA

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: BlumbergExcelsior Corporate Services, Inc.

Address: 155 Office Plaza Drive, 1st Fl.

TALLAHASSEE, FL 32301

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: Shirley W Wong

Address: 45 Tamarac Ave

Ponte Vedra, FL 32081

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*

x <u>Jose Mojica, Assistant Secretary</u>	<u>08/20/2021</u>
Required Signature/Registered Agent	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 <u>Shirley Wong</u>	<u>20Aug2021</u>
Required Signature/Incorporator	Date