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(Requestor's Name)
	Address)
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(1	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business Entity Name)
,	Document Number)
(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File L.C. File Trade/Service Mark Merger File Art. of Amend. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cen. Copy Photo Copy Photo Copy Photo Copy Certificate of Good Standing Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Search Fictitious Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Search UCC 11 Retrieval UCC 11 Retrieval UCC 11 Retrieval Courier					
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RA Resignation				Merger File	
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Cert. Copy				Dissolution / Witho	lrawal
Photo Copy				Annual Report / Re	rinstatement
Certificate of Good Standing				Cert. Copy	
Certificate of Status				Photo Copy	
Certificate of Fictitious Name				Certificate of Good	Standing
Corp Record Search				Certificate of Statu	S
Officer Search				Certificate of Fiction	ious Name
Fictitious Search				Corp Record Searc	h
Fictitious Owner Search				Officer Search	
Vehicle Search				Fictitious Search_	
Vehicle Search	Signature			Fictitious Owner S	earch
Driving Record	Signature			Vehicle Search	
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Walk-In Will Pick Up Courier		_		UCC 11 Search	
· · · · · · · · · · · · · · · · · · ·	name	Date	Time	UCC 11 Retrieval_	
		· · · · · · · · · · · · · · · · · · ·		Courier	

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

ARTICLE I NAME

	pration shall be: <u>SUMMECOSMETICS BEA</u>	.011 501100000	<u> </u>	<u> </u>	
<u>ARTICLE II PRI</u>	Principal <u>street</u> address		Mailing address, if different is:		
8726 NW 26 ST UNIT 8					
DORAL, FL 33172					
·					
ARTICLE III PUR	POSE				
ine purpose for which	h the corporation is organized is:	-			
ANY AND ALL LAWF	UL PURPOSES				
					
				_	
				2022 SEC	
				ZHAR CRE	
			_	F 10 5	
				(/) ·•	
ARTICLE IV SHA	RES			FY: 34 6	
The number of shares of	of stock is: 100 SHARES			2: 42 E. FL	
				6 0	
ARTICLE V INIT	IAL OFFICERS AND/OR DIRECTORS			· VB	
Name and Ti	tle: MASSIMILIANO CRISTIANI, PSD	Name and Title:			
Address	8726 NW 26 ST UNIT 8	Address:			
	DORAL, FL 33172				
			-		
Name and Titl	e:	Name and Title:_			
Address		Address:			
		_			
Name and Titl	e:	Name and Title:_			
Address	 -				
·					
			 -		
	<u> </u>				

Name	and Title:	_Name and Title:	
Addre		Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	CONSULTING SERVICES OF SOUTH FLOR	_	2 0.
Address:	2121 PONCE DE LEON BLVD STE 1050		獨皇州
	CORAL GABLES, FL 33134	<u>.</u>	2022 MAR 29 SECRETAHA
<u>ARTICLE VII</u>	INCORPORATOR		SS 7
The <u>name and</u>	address of the Incorporator is:	•	2: 12
Name:	ANTONIO GARCIA		(D)
Address:	2121 PONCE DE LEON BLVD STE 1050		i
	CORAL GABLES, FL 33134	_	
Effective date,	I EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific and cannot	(OPTIONAL) ot be more than five days prior or	r 90 days after the
Note: If the dat the document's	e inserted in this block does not meet the applicable effective date on the Department of State's records.	statutory filing requirements, this c	late will not be listed as
Having been na certificate, I am	med as registered agent to accept service of process for familiar with and accept the appointment as registere	or the above stated corporation at the ed agent and agree to act in this capa	ncity
	Required Signature/Registered Agent		03-29-2022
I submitablis de document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felo.	true. I am aware that the false infi ny as provided for in s.817.155, F.S	Date formation submitted in a S.
1 /12	1) June		03-29-2022
Required Signat	ure/Incorporator	Date	

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