7/27/23, 1:35 PM

2300055703 H230002620363

Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

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.

(((H23000262036 3)))



H230002620363ABCY

Note: DO NOT h	at the REFRESH/RELOAD button on your browser from t	this page.
	Doing so will generate another cover sheet.	. ~

Tu:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : WISE TAX FIRM INC.

Account Number : 120210000018 Phone : (786)620+0001 Fax Number (786)227-6631

**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 ELEGANCE & ESSENCE SPA. INC

The same of the sa	************************
Certificate of Status	()
Certified Copy	0
Page Count	()3
Estimated Charge	

Electronic Filing Menu Corporate Filing Menu

Help

H230002620363

H230002620363

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

ELEGANCE & ESSENCE SPA-INC		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:		
15001 LINCOLN BLVD		
MIAMI, FL 33176		
ARTICLE III SHARES: The number of shares of stock is: 100		
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
YUSEL GALINDO TORRES- PRESIDENT		
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:		
The name and Florida street address (PO Box not acceptable) of the registered agent is:		
YUSEL GALINDO TORRES	2023	
15001 LINCOLN BLVD	JUL (
MIAMI, FL 33176	. 27	
	D /	
ARTICLE VI INCORPORATOR: The name and address of the Incorporatoris:	PHID: or	
YUSEL GALINDO TORRES	3	
15001 LINCOLN BLVD		
MIAMI, FL 33176		

Required_Signatures;

Flaving 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

O7/27/2023

Pregistered 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 to gins.817.155. F.S.

| 07/27/2023 | Date |