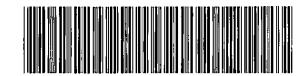
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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 16, 2018

MIKE VARGAS SOUTH LOUISIANA BEAUTY COLLEGE, LTD. COR 300 HOWARD AVE. HOUMA, LA 70363

SUBJECT: SOUTH LOUISIANA BEAUTY COLLEGE, LTD. CORP.

Ref. Number: W18000065030

We have received your document for SOUTH LOUISIANA BEAUTY COLLEGE, LTD. CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 418A00014587

Karen A Saly Regulatory Specialist II

COVER LETTER

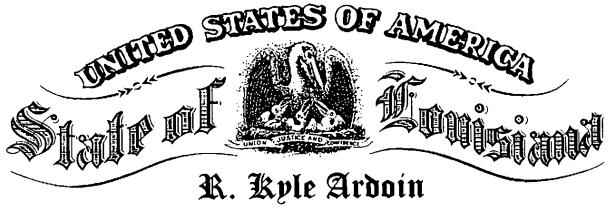
TO:		tration Se on of Co								
SUBJI	ECT:	South Lo	ousia	na Beauty (College, Ltd	d.				
				Nam	e of corpor	ration	- must	include suffix		
Dear Si	ir or M	adam:								
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Please	return a	ill corres	pond	ence concer	ning this r	natter	to the f	ollowing:		
Mike V	argas									
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Houma	a, LA 70	0363		-		Addre	ss			
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For fur	ther inf	ormation	con	erning this	matter, ple	ease c	all:			
Mike V	argas				86	32	200-	9789		
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	Regist Divisi Clifto 2661 1	ration Sc on of Co n Buildin	ctior rpora g : Cen	tions ter Circle	.ss:			MAILING Registration Division of P.O. Box 6. Tallahassee	n Sectio Corpo 327	on rations
Enclose	ed is a o	theck for	the f	ollowing ar	nount:					
= \$70	,00 Fili	ng Fee	0	\$78.75 Fill Certificate				5 Filing Fee & ied Copy	: O	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN RE	FOMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO EGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
	(Enter name of corporation; must include "INCORPORATED." COMPANY, "CORPORATION."	
1.	(Enter name of corporation; must include "INCORPORATED." COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co.," or "Corp.")	
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2.	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	$T_{U,\alpha} = 9 + 197\%$	
•	(Date of incorporation) (Date of duration, if other than perpetual)	
6.		
0.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7.	300 Howard Avenue, Houma LA	7036
• •	(Principal office address)	
		á
•	(Current mailing address, if different)	と用
S	Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	FILED JUL 17 PH
	My ylana	是口
	Name: Mike Vargers	,
Oí	office Address: 631 East Alexander st	2: 05
	Plant City Marille 33563	
	Mame: Mike Vargers GSI East Alasander St. Plant City, Florida 33563 (City) (Zip code)	
He de fu	Registered agent's acceptance: Iaving been named as registered agent and to accept service of process for the above stated corporation at the p esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capac orther agree to comply with the provisions of all statutes relative to the proper and complete performance of my uties, and I am familiar with and accept the obligations of my position as registered agent.	rity. I
	(Pagistured count's signature)	
	(Registered agent's signature)	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:	•
A. DIRECTORS	FILED
Chairman:	ΤΩ
Address:	THE WASTERSTAIN
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	<u> </u>
B. OFFICERS	
President: Catherine Nagy	
Address: 300 Howard Avenue	
Houma, LA 70363	
Vice President: Mike Vargas	
Address: 300 Howard Avenue	
Houma, LA 70363	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addi	tional officers and/or directors.
12.	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 about true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.	eve) affirms that the facts stated herein to the Department of State constitutes
13. Mike Vargas, V.P. & Director of Operations. (Typed or printed name and capacity of person signing a	pplication)



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

SOUTH LOUISIANA BEAUTY COLLEGE LTD.

A corporation domiciled in HOUMA, LOUISIANA,

Filed charter and qualified to do business in this State on June 09, 1976,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

July 17, 2018

R 12fe No. Secretary of State

Web 31425790D



Certificate ID: 10974165#9RK73

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov