

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.

(((H10000245138 3)))



H100002451383ABCY

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

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973

Fax Number : (305)220-1440

\*\*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 NEW ROOTS EXTENSIONS COMPANY

Certificate of Status 0

Certified Copy 1

Page Count 03

Estimated Charge \$78.75

Electronic Filing Menu

Corporate Filing Menu

Help 18

11/12/2010 10:17 3052201440 LAZARUS 500-51/-5361 11/12/2010 10:05:26 AM PAGE

1/001 Fax Server



November 12, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LA2ARUS

SUBJECT: NEW ROOTS EXTENSIONS COMPANY

REF: W10000052979

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P09000066354 (NEW ROOTS EXTENSIONS COMPANY).

An effective date may be added to the Articles of Incorporation if a 2011 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

If you have any further questions concerning your document, please call (850) 245-6901.

Pamela Smith Regulatory Specialist II New Filing Section FAX Aud. #: E10000245138 Letter Number: 610A00026579

NOVEMBER 12 2010

To whom it may concern:	
Please be advised that the owners of the company	NEW ROOTS EXTENSIONS
Company _with the document number	P0900006035 Vare the same as those
who are opening this new company with the same name. Thank you.	

Sincerely,

Amanee Young

FILED

10 NOV 12 PM 2: 22

H10000245138

SEGRETARY OF STATE TALMAHASSEE, FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I - NAME

The name of the corporation shall be:
NEW Roots Extensions Company

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this comporation shall be:

16573 SW 1954 Miramar 1233027

### ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

001

## ARTICLES IV – INTUAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Amanee Young 16573 SW1951 Miramar R 33027

FILED

H10000245138

10 NOV 12 PH 2: 22

ARTICLE V - INCORPORATOR

SEGRETARY OF STATE TALLAMASSEE, FLORIDA

The name and address of the incorporator to these Articles of Incorporation is:

16573500195+

Miramar fl 33027

The undersigned incorporator has executed these Articles of Incorporation this

day of NOVEMBER 20 10.

ARTICLE VI-DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of

Incorporation is (are);

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to not in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and secept the obligations of my position as Registered Agent.

H10000245138