

P14000087727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

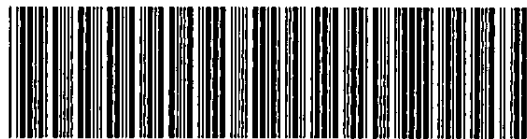
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

~~W14-63185~~

Office Use Only



500262301725

10/15/14--01004--007 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 OCT 27 PM 1:09

APPROVED
AND
FILED

11/17

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: **Doan M&D Nails & Spa Inc.**

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: **Myra Doan**

Name (Printed or typed)

306 East Ocean Avenue #103

Address

Boynton Beach, FL 33435

City, State & Zip

561-502-2832

Daytime Telephone number

Myradoan09@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 16, 2014

MYRA DOAN
306 EAST OCEAN AVENUE #103
BOYNTON BEACH, FL 33435

SUBJECT: DOAN M&D NAILS & SPA INC.
Ref. Number: W14000063185

We have received your document for DOAN M&D NAILS & SPA INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 614A00022228

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

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: Doan M&D Nails & Spa Inc.

14 OCT 27 PM 1:10

ARTICLE II PRINCIPAL OFFICE

Principal street address

9060 Kimberly Blvd. #31

Boca Raton, FL 33434

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Nail Salon

ARTICLE IV SHARES 50

The number of shares of stock is: 50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Myra Doan/President

Name and Title: _____

Address 306 E. Ocean Avenue #103

Address: _____

Boynton Beach, FL 33435

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

APPROVED
AND
FILED

(conti.)

14 OCT 27 PM 1:10

Name and Title: _____	Name and Title: _____
Address _____	Address: <u>SECRETARY OF STATE</u>
_____	<u>TALLAHASSEE, FLORIDA</u>
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

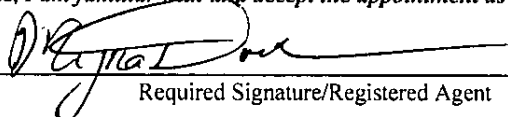
Name: Myra Doan
Address: 306 East Ocean Avenue #103
Boynton Beach, FL 33435

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Myra Doan
Address: 9060 Kimberly Blvd. # 31
Boca Raton, FL 33434

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


Required Signature/Registered Agent

06/27/2014

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.


Required Signature/Incorporator

06/27/2014

Date

RECEIVED
14 OCT 27 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA