

3/12/2019

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
P19000083449

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : I2018000011
Phone : (844)386-0178
Fax Number : (214)317-4754

****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
HAIR BY MARCIA, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

2019 MAR 12 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME HAIR BY MARCIA, INC.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address _____ Mailing address, if different is: _____
3530 CYPRESS EDGE DRIVE _____
LAKE WORTH, FL 33467 _____

ARTICLE III PURPOSE TO OPERATE A HAIR SALON AND ANY OTHER BUSINESS
The purpose for which the corporation is organized is: _____
LEGAL IN THE STATE OF FLORIDA AND UNITED STATES _____

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARCIA DI PIERNO, PRES-TREAS Name and Title: _____
Address: 3530 CYPRESS EDGE DRIVE Address: _____
LAKE WORTH FL 33467 _____

Name and Title: JASON DI PIERNO, SECRETARY Name and Title: _____
Address: 3530 CYPRESS EDGE DRIVE Address: _____
LAKE WORTH, FL 33467 _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: MARCIA DI PIERNO

Address: 3530 CYPRESS EDGE DRIVE
LAKE WORTH FL 33467

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARCIA DI PIERNO

Address: 3530 CYPRESS EDGE DRIVE
LAKE WORTH FL 33467

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

* *Marcia Di Pierno*
 Required Signature/Registered Agent

3/11/19
 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.

* *Marcia Di Pierno*
 Required Signature/Incorporator

3/12/19
 Date

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