F04000001130

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	n #0
PICK-UP		MAIL
(Busi	ness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
719 F	PC	
CC	HWS	

Office Use Only



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MJH. I



TRANSMITTAL LETTER

TO:	Registra Division			ns			
SURI	ECT:	Hair	Care	International,	Inc.		
0000					tion - must include:	suffix)	
Dear S	ir or Mad	am:					
"Certif		xistence	", and	Foreign Corporation : check are submitted			isiness in Florida", foreign corporation to
Please	return all	corresp	ondenc	e concerning this ma	ter to the following:	:	
	Leonard	d Colo	ona		· Santa S	5/3°6	·
	• •			(Name	of Person)	·· ·	
	Seyfar	th Sha	w LLP				
	,			(Firm	Company)		
	1270 A	venue :	of the	Americas, Suit	e 2500	24.000	
	-			(A	ddress)		
	New Yor	ck, NY	10020)			
			·	(City/Sta	te and Zip code)		
				,			
For fu	rther info	rmation	concer	ning this matter, plea	e call:		
Leon	nard Co	Lonna		at (212)_218-5500		
	(Name	of Perso	on)	(Ar	ea Code & Daytime	Telephone	Number)
STRE	ET ADD	RESS.			MAILING AD	DRESS:	
Regist	ration Sec	etion			Registration Se	ection	
Division of Corporations 409 E. Gaines St.			Division of Co. P.O. Box 6327	Division of Corporations			
	allahassee, FL 32399 Tallahassee, FL 32314				-		
			the foll	owing amount:			
□ \$70).00 Filinį	g Fee		8.75 Filing Fee & ertificate of Status	☐ \$78.75 Filing F Certified Copy		\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

l,	Hair Care International, Inc.						
	(Enter name of corporation; must include "INCORPORAT" "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")	ED,"	"COMPANY," "CORPORATION,"				
	, co., co.p, co, or co.p. ,						
	(If name unavailable in Florida, enter alternate corporate na	ıme a	dopted for the purpose of transacting bus	iness in	Florid	a)	
2	New York	3					
<u> </u>	State or country under the law of which it is incorporated)		(FEI number, if applicable)				
4.	December 3, 2003	5	Parnetuel				
	(Date of incorporation)	J	5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")				
6.	Upon Qualification						
	Date first transacted business in Florida. If corporation has			on quali	fication	n.")	
	(SEE SECTIONS 607.1	501,	607.1502 and 817.155, F.S.)				
7	8243 Jericho Turnpike, Woodbury, N				<u> </u>		
	(Principal office	addro	ess)				
_	Same (Current mailing			*			
	(Current mailing	aggre	288)				
8.	To among do the bade are all to	•					
ο.	To engage in the hair care and hear (Purpose(s) of corporation authorized in home state of	r cou	intry to be carried out in state of Florida)	¢		 ·	
a	Name and street address of Florida registered agen	.+. /1	O Pay or Mail Dron Pay NOT and	7.» 	75		
7.	tvame and street address of Florida registered agen	it: (1	e.o. Box of Mail Drop Box NOT acc	ebiaois	" 品		
	Name: Anthony Carrubba		<u></u>	_0/:	19	Trebuges Extension	
Of	fice Address: 300 6th Street North, #4			· · ·		: 	
		-		[]	Æ 1¥1	J	
			, Florida <u>34695</u>	ii Taras de Taras de la composição de Taras de la composição de	: 05		
	(City)		(Zip code)	ا احد	; ب		

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

- 11. 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.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS Chairman: Joseph Colonna Address: 4 Carriage Lane Plainview, NY 11803 Vice Chairman: Thomas Carboara Address: Director: __ Address: ___ Address: B. OFFICERS President: Joseph Colonna Same Vice President: Thomas Carboara Address: Same Secretary: _ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. _____ Joseph Colonna (Typed or printed name and capacity of person signing application)

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of HAIR CARE INTERNATIONAL, INC. was filed on 12/03/2003, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 11th day of February - two thousand and four.

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