

PO0000004494
TRANSMITTAL LETTER

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

800003065438--0
-12/03/99--01058--009
*****70.00 *****70.00

SUBJECT: UPPER CUTS OF ORLANDO, INC.
(Proposed corporate name - must include suffix)

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

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

LILLIAN GRYL

Name (printed or typed)

209 KITTELY LANE

Address

APOPKA, FL 32703

City, State & Zip

(407) 291-1131

Daytime Telephone number

00 JAN 12 PM 2:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

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

CP
1-13-00



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

December 21, 1999

LILLIAN GRYL
209 KITTELY LANE
APOPKA, FL 32703

SUBJECT: UPPER CUTS OF ORLANDO, INC.
Ref. Number: W99000028300

We have received your document for UPPER CUTS OF ORLANDO, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

I recieved the notarized affidavit from you. But before I can file the Articles. You are need to voluntarily dissolve the active one on file. Then resubmit the Articles with the notarized affidavit. For your convinence I am sending you the dissolution form.

Please return the 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) 487-6930.

Carolyn Batten
Document Specialist

Letter Number: 399A00058361

12-17-99

FILED
00 JAN 12 PM 2:32
RECEIVED BY OF STATE
TALLAHASSEE FLORIDA

RE. Incorporation of Upper-Cuts
of Orlando, Inc.
8885 W. Colonial Dr.
Orlando, FL 32817

I, Jaci Vallillo - as registered
agent do not or ever intend to
use the name of Upper Cut of
Orlando or reinstate it, as in
corporation.

We sold business to:

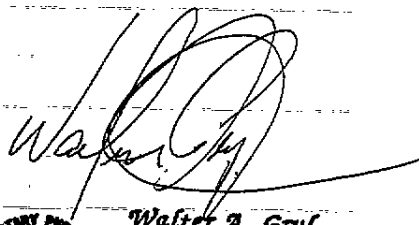
→ Lynn Smith

→ Lillian Gryl

on Sept 27, 1999.

Thank you,

Jaci Vallillo





Walter A. Gryl
State of Florida
Notary Public
Commission Expires
December 26, 1999
I.D. # CC 734419

ARTICLES OF INCORPORATION

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:

UPPER CUTS OF ORLANDO, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8885 W. COLONIAL DR.
OCOE, FL 34761

ARTICLE III SHARES

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

ONE HUNDRED (100) SHARES AT ONE DOLLAR (\$1.00) PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LILLIAN GRYL
209 KITTY LANE
APOKA, FL 32703

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TALLAHASSEE FLORIDA

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LILLIAN GRYL
209 KITTELY LANE
APOPKA, FL 32703

MARY ANN SMITH
804 RIO ALA MANO DR.
ALTAMONTE SPRINGS, FL 32714

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

6th day of December, 19 99.

Lillian Gyl
Signature

Mary Ann Smith
Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

UPPER CUTS OF ORLANDO, INC.

2. The name and address of the registered agent and office is:

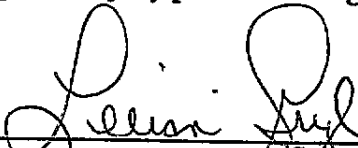
LILLIAN GRYL
(NAME)

209 KITTELY LANE
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

APOPKA, FL 32703
(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

12/6/99
(DATE)