AZĀRUS CORPORATE FILING SERVICE (Requestor's Name) 3320 S.W. 87 AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time 2.00 Walk in Certificate of Status Mail out Will wait Photocopy AMENDMENTS NEW FILINGS Amendment **Profit** Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other 300003216093 -04/20/00--01023-REGISTRATION/ OTHER FILINGS **QUALIFICATION** Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials



April 20, 2000

LAZARUS

MIAMI, FL

SUBJECT: NEW YORK STYLE BARBER SHOP INC.

Ref. Number: W00000010469

We have received your document for NEW YORK STYLE BARBER SHOP INC.. However, the document has not been filed and is being returned for the following:

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.

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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 900A00021813

OD APR 24 PH 2: 53
DEPARTMENT OF STATE OF STATE



ON THE WAR OF THE STREET

NEW YORK STYLE BEAUTY SALON CORP.

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 YORK STYLE : BEAUTY SALON CORP.

ARTICLE II PRINCIPAL OFFICE

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

3015 N.W. 79 ST. A-23 & B-23

MIAMI, FLORIDA 33147

ARTICLE III SHARES

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

100 - \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HECTOR PICHARDO 3283 N.W. 99 ST. MIAMI, FL 33147

ARTICLE V INCORPORATOR(S)

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

HECTOR PICHARDO - PRESIDENT - 3283 N.W. 99 ST. MIAMI, FL 33147

RICHARD RODRIGUEZ - TREASURER - 1535 S. W. 122 AVE. MIAMI, FL 33184

MIGUEL ALMANZA - VICE-PRESIDENT -215 N. W. 109 AVE. MIAM, I, FL 33172 - UNIT 2

The unde	ersigned in	corporator(s) h	nas(have) executed	these Articles of Incorp	poration this
	20TH	day of	APRIL	, 1 /9 2,000.	
	4	J. ///	Signature		· · · · · · · · · · · · · · · · · · ·
			Signature		· · · · · · · · · · · · · · · · · · ·
			Signature		· ·

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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 corpo	pration is: NEW YORK STYLE BEAUTY	SALON CORP.
2. The name and address	s of the registered agent and office is	s:
-	HECTOR PICHARDO	TALL TALL
·	(Name)	- FOR
	3283 N. W. 99 ST.	ASS ASS
	(P.O. Box not acceptable)	THO R I
	MIAMI, FL 33147	FLOR
	(City/State/Zip)	——— (ST 7
Having been named as regabove stated corporation as the appointment as registe to comply with the provision mance of my duties, and I as registered agent.	gistered agent and to accept service at the place designated in this certifiered agent and agree to act in this cons of all statutes relating to the proam familiar with and accept the obliging	e of process for the icate, I hereby accept apacity. I further agree per and complete perforgations of my position
(Signature)		(Date)

(Date)