

TRANSMITTAL LETTER

ACC000042856

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

SUBJECT: Future Hair and Salon, Inc.
(Proposed corporate name - must include suffix)

300003226743--4
-04/27/00--01056--015
*****87.50 *****87.50

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 of Status

☐ \$78.75 Filing Fee & Certified Copy
☒ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Rhoda Toth
Name (Printed or typed)

10436 US Highway 19
Address

Port Richey, FL 34668
City, State & Zip

1-727-819-9300
Daytime Telephone number

FILED
00 APR 27 AM 11:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Per Bobbie -

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

Rhoda Toth
AUTHORIZATION BY PHONE TO
~~CORRECT~~ Add Suffix + Stock
DATE 4/28
SOC. EXAM SHT

S. Thompson APR 28 2000

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Future Hair and Salon, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Future Hair and Salon

10430 US Highway 19 Port Richey, Fl. 34668

ARTICLE III SHARES

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

1

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Rhoda Toth

10436 US Highway 19 Port Richey, Fl. 34668

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Rhoda Toth

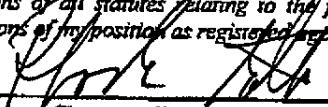
10436 US Highway 19 Port Richey, Fl. 34668


Signature/Incorporator

4/26/00
Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

4/26/00
Date

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00 APR 27 AM 11:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA