

TRANSMITTAL LETTER

P000000045124

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

SUBJECT: Patty Gab, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

500003238235-5  
-05/03/00-01132-009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: Gabrielle Reineck  
Name (Printed or typed)

2401-A Tamiami Trail  
Address

Port Charlotte, FL 33954  
City, State & Zip

(941) 613-2200  
Daytime Telephone number

00 MAY -3 PM 2:29  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Patty GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT shares and Incorp.  
DATE 05/05/00  
DOC. EXAM aj

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

aj/s/s

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

Patty Gab, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2401-A Tamiami Trail  
Port Charlotte, FL 33952

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To operate a full service salon.

## ARTICLE IV SHARES

The number of shares of stock is:

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

## ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

Gabrielle Reineck  
244 Ferdon Circle  
Port Charlotte, FL 33954

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gabrielle Reineck  
244 Ferdon circle  
Pt. Charlotte, FL 33954

\*\*\*\*\*  
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

GReineck  
Signature/Registered Agent

4/12/00  
Date

GReineck  
Signature/Incorporator

4/12/00  
Date

FILED  
00 MAY -3 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA