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Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A.

Account Number : I19990000058 Phone : (954)753-6042 Fax Number : (954)753-1123

FLORIDA PROFIT CORPORATION OR P.A.

MICK'S BARBER SHOP, INC.

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$78.75 |

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ARTICLES OF INCORPORATION ÓF

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

ARTICLE ONE

NAME

The name of the corporation shall be: Mick's Barber Shop, Inc.

ARTICLE TWO

PRINCIPAL OFFICE

The principle place of business and mailing address of this Corporation shall be:

> 5980 N.W. 16th Place Sunrise, Florida 33313

SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A. 9690 W. Sample Road SUITE 202 CORAL SPRINGS, FL 33065 (954) 753-2222 H000000599522

ARTICLE THREE

CAPITAL STOCK

The number of shares of stock that this Corporation is authorized to have outstanding at one time is one thousand shares of common stock with a par value of one dollar.

ARTICLE FOUR

INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is: Evan McDonough 5980 N.W. 16th Place Sunrise, Fl 33313

ARTICLE FIVE

INCORPORATOR

The name and address of the Incorporator is: Evan McDonough 5980 N.W. 16th Place #6A Sunrise, Fl 33313

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The undersigned has executed these Articles of Incorporation. This 15th day of November.

Signature:

Date: 11-15-2000

CERTIFICATE OF DESIGNATED REGISTERED AGENT

Pursuant to the provisions of section 607.0501 Florida Statutes, the Undersigned Corporation, under the Laws of the State of Florida submits to the following statement designating the registered agent in the State of Florida.

- 1. The name of the corporation is:

 Mick's Barber Shop, Inc.
- 2. The name and address of the registered agent

Evan McDonough

5980 N.W. 16th Place #

Sunrise, Fl 33313

Signature:

Date: 11-15.2000

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Having been named as the Registered Agent and to accept service of process for the above stated corporation at the place designated in this Certificate, I accept the appointment as Registered Agent and agree to comply with the provisions of all the 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:

Date: 11-15-200

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SECRETARY OF STATE
AND ASSEFT, FLORIDA