

TRANSMITTAL LETTER

PO10000-15147

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

000003662230--6  
-02/08/01--01102--006  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: HAIR BY KATHI CLEMONS, 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 of Status

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

FROM: KATHI CLEMONS  
Name (Printed or typed)

202 Laguna Villas Blvd # B12  
Address

Jacksonville Beach, FL 32250  
City, State & Zip

904-268-9011 or 904-509-4858  
Daytime Telephone number

FILED  
01 FEB -8 PM 3:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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



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2/7/01  
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# 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:

Hair By Kathi Clemons, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11250 Old St. Augustine Rd. #11  
Jacksonville, FL 32257

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Personal Beauty Service

## ARTICLE IV SHARES

The number of shares of stock is:

51

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Kathi Clemons  
President  
202 Laguna Villas Blvd B12  
Jacksonville, FL 32250

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Kathi Clemons  
202 Laguna Villas Blvd B12  
Jacksonville, FL 32250

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kathi Clemons  
202 Laguna Villas Blvd B12  
Jacksonville, FL 32250

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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

Kathi Clemons  
Signature/Registered Agent

Date

2-5-01

Kathi Clemons  
Signature/Incorporator

Date

2-5-01

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