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TRANSMITTAL LETTER  
FILED

01 JUN 13 PM 3:40

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

SUBJECT: Hair Illusions Styling Salon, Inc  
(Proposed corporate name - must include suffix)

800004417538--0  
-06/13/01--01051--004  
\*\*\*\*131.25 \*\*\*\*\*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

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Premier Financial  
Name (Printed or typed)

112 W. Adams St. #816  
Address

Jacksonville, FL 32202  
City, State & Zip

904-355-2191  
Daytime Telephone number

D. WHITE JUN 14 2001 22

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

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TALLAHASSEE FLORIDA

## 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:

Hair Illusions Styling Salon, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

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

9048 Lem Turner Rd.  
Jacksonville, FL 32208 (904)696-2717

### **ARTICLE III SHARES**

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

100 Shares

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Premier Financial c/o J. Chappelle  
112 W. Adams St. #816  
Jacksonville, FL 32202

### **ARTICLE V INCORPORATOR**

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

Kathleen J. Mayhew  
11567 Riva Ridge Ct.  
Jacksonville, FL 32216

  
Signature/Incorporator

  
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

  
Date