

TRANSMITTAL LETTER

P01000100693

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

FILED
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
01 OCT 15 PM 12:33

SUBJECT: Utopia Salon & Spa, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

100004636221-1-5
-10/15/01--01042--003
*****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: JAMIE A. LYNCH
Name (Printed or typed)

13953 GERANIUM PL
Address

WELLINGTON, FLORIDA 33414
City, State & Zip

(561) 596-2790 (OR) (561) 798-6955
Daytime Telephone number

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

F. CHEN 071 OCT 17 2001

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:

Utopia Salon + Spa, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

The Riverside Shoppes & Professional Centre
739 N. Federal Hwy.
STUART, Florida 34994

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Beauty Salon and Spa Services

ARTICLE IV SHARES

The number of shares of stock is:

100 (ONE HUNDRED)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JAMIE A. LYNCH
13953 Geranium PL.
Wellington, FL 33414
C.E.O. & Secretary

MICHAEL R. LYNCH
13953 Geranium PL
Wellington, FL 33414
PRESIDENT

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ARTICLE VI REGISTERED AGENT

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

JAMIE A. LYNCH
13953 GERANIUM PL
WELLINGTON, FL. 33414

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMIE A. LYNCH
13953 GERANIUM PL
WELLINGTON, FL 33414

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

Jamie A. Lynch
Signature/Registered Agent

10-11-2001
Date

Jamie A. Lynch
Signature/Incorporator

10-11-2001
Date