

P02000013682

TRANSMITTAL LETTER

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

600004772726--2
-01/14/02--01043--022
*****78.75 *****78.75

SUBJECT:

^{HAIR}
Lily's Haven 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:

Lillian CLAMOLLI

Name (Printed or typed)

663 N.W. 151 Ave

Address

Pembroke Pines, Fla 33028

City, State & Zip

(954) 662-8789

Daytime Telephone number

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JAN 31 AM 7:56

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

2 + 788

1c
2/7

602A 7536
102A 3105



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 22, 2002

LILLIAN CLAMOLLI
663 NW 151 AVE
PEMBROKE PINES, FL 33028

SUBJECT: LILY'S HAVEN INC.
Ref. Number: W02000001788

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JAN 31 AM 7:56

We have received your document for LILY'S HAVEN INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6904.

Freida Chesser
Corporate Specialist
New Filings Section

Letter Number: 102A00003105

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:

Lily's Hair Haven Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*663 N.W. 151 AVE.
Pembroke Pines, Fla. 33028*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Beauty Salon

ARTICLE IV SHARES

The number of shares of stock is: *500*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

*Lillian C. Lamolli
663 N.W. 151 AVE
Pembroke Pines, Fla. 33028*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Lillian C. Lamolli
663 N.W. 151 AVE
Pembroke Pines, Fla. 33028*

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

Lillian C. Lamolli

Signature/Registered Agent/Incorporator

1/10/02

Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JAN 31 AM 7:56