### TRANSMITTAL LETTER

# 0200018167

Department of State **Division of Corporations** P. O. Box 6327 Talla

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Tallahassee, FL	32314	900004914589 -02/13 <u>/</u> 0201046-	)—— <b>()</b> -003
		****** (8, (5) *****	*78.75
SUBJECT:	Michaels	HAIR DESIGN, THE.	
_	(PROPOSED CO	ORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )	

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

				<b>1</b>			
\$70.00 Filing Fee	₹ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED				
EDOM	Para M. I			TARIS TARIS			
FROM: RAYMOND Michael Sharpe Name (Printed or typed)  Name (Printed or typed)							
1707 Campben He = majo							
ORLANDO FLORIDA 32806  City, State & Zip							
407-593-9013  Daytime Telephone number  407-4572-9100							
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NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION OF: MICHAEL'S HAIR DESIGN, INC.

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: MICHAEL'S HAIR DESIGN, INC.

#### ARTICLE II PRINCIPAL PLACE OF BUSINESS:

The principal place of business and the corporate principal office and mailing address is

1707 Campbell Ave. Orlando, Florida 32806

#### ARTICLE III CAPITAL STOCK

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

100 SHARES OF COMMON STOCK AT ONE DOLLAR (\$1.00) PAR VALUE

#### ARTICLE IV NATURE OF BUSINESS

The general nature of the business to be transacted by this Corporation is:

ALL ACTIVITIES RELATED TO THE OPERARATIONS AND SERVICES OF A HAIR SALON SPECIALIZING IN HAIR CUTTING AND HAIR COLORING SERVICES, SALE OF COSMETICS PRODUCTS, BEAUTY CARE PRODUCTS, SKIN CARE AND HAIR CARE PRODUCTS, NAIL SERVICES, SKIN CARE FACIALS, AND BOOTH RENTALS. ADDITIONALLY, THIS CORPORATION MAY, AND IS AUTHORIZED TO, ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND OF THE STATE OF FLORIDA

ARTICLE V THE INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Raymond Michael Sharpe 1707 Campbell Ave. Orlando, Florida 32806 SECRETARY OF STATE TALL AND SEE. FLURIDA

#### ARTICLE VI INITIAL BOARD OF DIRECTORS

This corporation shall have one director initially. The number of directors may be either increased or diminished from time to time, but shall never be less than one. The name and addresses of the initial director of this corporation is:

Raymond Michael Sharpe 1707 Campbell Ave. Orlando, Florida 32806

Who shall be the initial director, president, secretary and treasurer.

#### ARTICLE VII TERMS OF EXISTENCE

The effective date upon which this Corporation shall come into existence shall be the date of the filing of these Articles of Incorporation, and it shall exist perpetually thereafter unless dissolved according to law.

#### ARTICLE VIII -- INCORPORATORS

The name and address of the incorporator signing these Articles of Incorporation is:

Raymond Michael Sharpe 1707 Campbell Ave. Orlando, Florida 32806

The undersigned incorporator has executed these Articles of Incorporation this 11th day of February, 2002

OFFICE MARTHA C. GONZALEZ

NO. CC 831626

Il Personally Known (Lether I.D.)

Signature

RAY HOND MICHAEL Shanpe

Digned before me on this 11th Bey of February of the year 2002, at Drange County, Ft.

#### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

The Name of the Corporation is: Michael's Hair Design, Inc.

The name and address of the registered agent and office is:

Raymond Michael Sharpe 1707 Campbell Ave. Orlando, Florida 32806

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** 

DATE:

PREPARED BY: JULIO GONZALEZ, CPA TAX AND ACCOUNTING SERVICES 4773 SOUTH ORANGE AVE Orlando, Fl 32806 TEL 407-857-3563

MARTHA C. GONZALEZ My Comm Exp. 4/29/2003

No. CC 831626

[ ] Personally Known #10ther I.D.