

02 FEB 18 PH 3: 07

SECKET STATE TALLAHASSEE, FLORIDA

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 400004947544--1 -02/18/02--01040--019 *****78,75 *****78,75

SUBJECT:	SIGGYIS	HAIR	570010	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

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	SIGALIT ARONOW					
	Name (Printed or typed)					
	407 SOUTH QUOODON # 3					
	Address	_				
,	TRUPA, FL 33609 City, State & Zip	_				
	City, State & Zip					
	813- 238-6993	_				
	Daytime Telephone number	_				

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

CB 2-20

ARTICLES OF INCORPORATION

FILED

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SECHE TALL OF STATE TALLAHASSEE, FLORIDA

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:

516Gy'S HAIR STUDIO INC.

ARTICLE II PRINCIPAL OFFICE

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

4902 WATERS AUG. TOMPO, FL 33634

ARTICLE III SHARES

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

1006

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

407 SOUTH AUDUBON MUG #3

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

SIGNALIT RADOUBON RUE #3
TAMPA, F.L 33609

2/13/02 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 is registered agent

Signature/Registered Agent

ature/Incorporator

`Date