TRANSMITTAL LETTER

P02000024538

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

SUBJECT: LA'KEE NAILS, INC.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

500005026495--6
-02/28/02--01045--012
*****78.75 *****78.75

Enclosed are 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: LA'KEE NAILS, INC.
Name (Printed or typed)

8309 ENDIVE AVE
Address

TAMPA FL 33619
City, State & Zip

813-789-6140
Daytime Telephone number

NO COPY

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

03-06-02

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:

LA'KEE NAILS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8309 ENDIVE AVE
TAMPA FL 33619

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NAIL SALON

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): DIMETRIA JACKSON President
8309 ENDIVE AVE
TAMPA, FL 33619

ARTICLE VI REGISTERED AGENT

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

DIMETRIA JACKSON
8309 ENDIVE AVE
TAMPA, FL 33619

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

DIMETRIA JACKSON
8309 ENDIVE AVE
TAMPA, FL 33619

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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

Dimetria Jackson
Signature/Registered Agent

February 26, 2002
Date

Dimetria Jackson
Signature/Incorporator

February 26, 2002
Date