

PO2000132420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

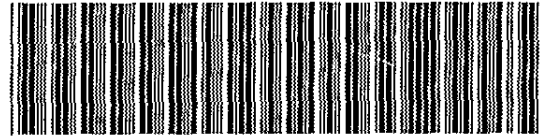
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

8/10/01
12/16/02

TRANSMITTAL LETTER

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

SUBJECT: The Agency of Specialty Cut's Modeling and Fashion I-
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Ruby L Jackson
Name (Printed or typed)
6453 Dickens Drive
Address
Jacksonville Florida 32244
City, State & Zip
904-779-1526-904-786-9660
Daytime Telephone number

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

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: *The Agency of Specialty Cut's Modeling and Fashion Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *Ruby L. Jackson
6453 Dickens Drive
Jacksonville Florida 32244*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *Specialty Cut's Modeling and Fashion Inc. is a S-Corp. in the state of FL. and surrounding areas and will offer the services of professional training (modeling, coordinator, hair and make-up and fashion consultants) to students and clients.*

ARTICLE IV SHARES

The number of shares of stock is: *100 per share value*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): *Ruby Jackson - President
6453 Dickens Drive
Jacksonville Florida 32244*

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TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

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

*Ruby L. Jackson
6453 Dickens Drive
Jacksonville Florida 32244*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Ruby L. Jackson
6453 Dickens Drive
Jacksonville Florida 32244*

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

x Ruby L. Jackson

Signature/Registered Agent

Dec. 2, 02

Date

Ruby L. Jackson

Signature/Incorporator

Dec. 2, 02

Date