

P03000016887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

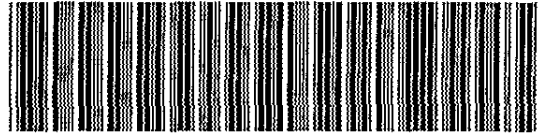
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

Oral Wright **GAVE**
AUTHORIZATION BY PHONE TO
CORRECT corp suffix
DATE 2-12-03
DOC. EXAM of



500011776795

02/07/03--01012--001 **87.50

FILED
03 FEB -6 PM 2:37
SECRETARY OF STATE
ALABAMA

2/12

TRANSMITTAL LETTER

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

SUBJECT: Beauty Supply N.Y. Style Incorporated
(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: Oral Wright
Name (Printed or typed)

4424 Inverrary Blvd
Address

North Lauderdale Fl. 33319
City, State & Zip

(954) 816-7476
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:

Beauty Supply N.Y. Style Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

4424 Inverrary Blvd North Lauderdale 33319

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Beauty Supply Store

ARTICLE IV SHARES

The number of shares of stock is:

One

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Oral W Wright 3981 N.W. 44th Terrace Lauderdale Lakes 33319
President, Secretary, Treasurer

ARTICLE VI REGISTERED AGENT

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

Oral W Wright 3981 N.W. 44th Terrace Lauderdale Lakes Fl 33319

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Oral Wright 3981 N.W. 44th Terrace Lauderdale Lakes Fl. 33319

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TALLAHASSEE FLORIDA

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

Oral Wright
Signature/Registered Agent

11/31/03
Date

Oral Wright
Signature/Incorporator

11/31/03
Date