

P03000039061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

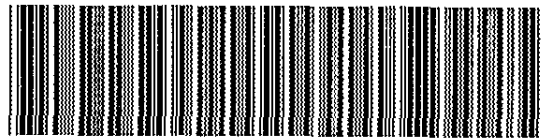
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 8

TRANSMITTAL LETTER

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

SUBJECT: ELITE HAIR DESIGN, INC.

(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
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: MAMISE ADRIE M
Name (Printed or typed)

2254 SW 68TH TERRACE

Address

MIRAMAR, FLORIDA 33023

City, State & Zip

(305) 546-8829

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:

ELITE HAIR DESIGN, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2254 SW 68TH TERRACE, MIRAMAR FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO TRANSACT ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

MAMISE ADRIEN - PRESIDENT, VICE PRESIDENT, TREASURER, & SECRETARY -
2254 SW 68TH TERRACE, MIRAMAR FLORIDA 33023

ARTICLE VI REGISTERED AGENT

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

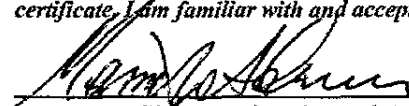
MAMISE ADRIEN - 2254 SW 68TH TERRACE, MIRAMAR FL 33023

ARTICLE VII INCORPORATOR

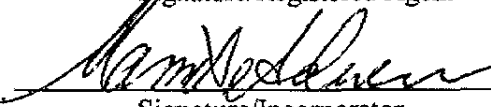
The name and address of the Incorporator is:

MAMISE ADRIEN - 2254 SW 68TH TERRACE, MIRAMAR , FL 33023

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


Signature/Registered Agent

3/27/03
Date


Signature/Incorporator

3/27/03
Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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