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TRANSMITTAL LETTER

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

SUBJECT:	Sunsationa	1 Tans		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,	
•	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Lisette Go.	ngora		
	Name	(Eranted or types)		
9033 S.W. & Street				
	Miami, F	=1. 33174 State & Zip		
		70 - 7106 Telephone number		

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





April 18, 2003

LISETTE GONGORA 9033 S.W. 6 STREET MIAMI, FL 33174

SUBJECT: SUNSATIONAL TANS Ref. Number: W03000011151

We have received your document for SUNSATIONAL TANS and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 303A00023434

Neysa Culligan Document Specialist New Filings Section

FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

03 APR 29 PM 2: 46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Sunsational Tans, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9033 S.W. 6 Street miami, F1. 33174

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Profit

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Lisette Gongora P, S, D 9033 S.W. 6 Street Miami, Fl. 33174 Robert Gorgora VP, T, D 9033 S.W. & Street miami, F1.33174

ARTICLE VI REGISTERED AGENT

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

Lisette Gongora 9033 s.w. to street miami, F1. 33174

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lisette Gongora 9033 S.W. le Street Miami, Fl. 33174

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