## P04000033040

(Requestor's Name)
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## TRANSMITTAL LETTER

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

Enclosed are an original and one (1) copy of the artic	lag of incomposition and	d a abaak foru
Enclosed are an original and one (1) copy of the artic  \$70.00 \$18.15  Filing Fee Filing Fee  & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
A = A = A = A = A = A = A = A = A = A =	ADDITIONAL CO	OPY REQUIRED
FROM: HUDSEY Wade	Printed or typed)	
13844 82nd St	reet Nor	4h_
West Palm Be	State & Zip! Fla.	33/12
(5UI) 7907	1999 dephone number	<u> </u>

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

ARTICLE I NAME The name of the corporation shall be:
Triple "999" Salon Trac.
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
13847 82nd Street North
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:
full Service Hair + Mail Salor
The number of shares of stock is:
100
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):
Audrey Wade May (west Palm Boach, FLa.) 13847 8 grd Street North (west Palm Boach, FLa.) President
ARTICLE VI REGISTERED AGENT
The name and Florida street address of the registered agent is:    Hudrey Wode May   13844   1
The <u>name and address</u> of the Incorporator is:  Audrey Wade May
13847 82nd Street North (west Palm Beach, Fla)
**************************************
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
7/1 / / / / / / / / / / / / / / / / / /
1 Signatural A const
Signature/Registered Agent  Date
Signature/Incorporator Date

ARTICLES OF INCORPORATION

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