

P04000043197

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

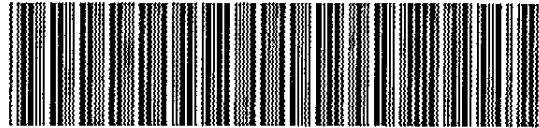
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/10/04--01019--025 **87.50

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAR 10 PM 2:16

10-8558
10

TRANSMITTAL LETTER

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

SUBJECT: _____

Salon Salon Spa, 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: _____

KE KROEBER

Name (Printed or typed)

157 FLAMINGO Rd

Address

Edgewater, FL 32141

City, State & Zip

386-426-0961

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 2, 2004

KE KROEBER
157 FLAMINGO RD.
EDGEWATER, FL 32141

Wanda

SUBJECT: SALON SALON
Ref. Number: W04000008508

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

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6995.

Wanda Cunningham
Document Specialist
New Filings Section

Letter Number: 904A00013914

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: Salon Salon Spa, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 2120 Ridgewood Ave
Belmont Plaza
Edgewater, FL 32141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To operate a Salon

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): KENNETH E KROEBER
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

Michael D. Halsman
1860 160th AVE
NEW SMYRNA BEACH, FL 32117

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KENNETH E KROEBER
157 FLAMINGO RD
EDGEWATER, FL 32141

386-426-0961 OR 386 690 0666

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]
Signature/Registered Agent

2/2/04.
Date

[Signature]
Signature/Incorporator

2/04/04
Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAR 10 PM 2:16