

PD4000047726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

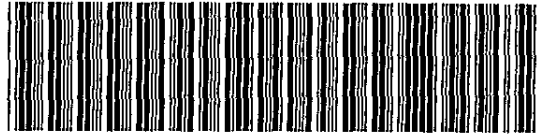
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

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

SUBJECT: Hair By Patty 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: Patricia M. LeFevre
Name (Printed or typed)
2803 W. Aquilla St
Address
Tampa FL 33629
City, State & Zip
813 251-4275
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:

Hair By Patty Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4027W. Kennedy Blvd., Tampa, FL 33609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide cosmetology Services.

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Patricia M. LeFevre, 2803 W. Aguiilla St., Tampa, FL 33629 President
David A. LeFevre, 2803 W. Aguiilla St., Tampa, FL 33629, Vice President

ARTICLE VI REGISTERED AGENT

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

Patricia M. LeFevre, 2803 W. Aguiilla St., Tampa, FL 33629

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patricia M. LeFevre, 2803 W. Aguiilla St., Tampa FL 33629

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

Patricia M. LeFevre

Signature/Registered Agent

3-8-04

Date

Patricia M. LeFevre

Signature/Incorporator

3-8-04

Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA