

PO4000047905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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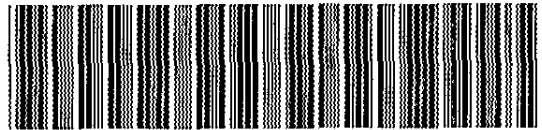
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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✓
3/17/04

TRANSMITTAL LETTER

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

SUBJECT: NAILS BY MARTICA, 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: Marta B. Iglesias
Name (Printed or typed)

519 S.W. 11 Ave. Apt. 5
Address

Miami, Fl. 33130
City, State & Zip

(305) 324-5156
Daytime Telephone number

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

ARTICLES OF INCORPORATION

OF

Nails By Martica, Inc.

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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the corporation is Nails By Martica, Inc.

ARTICLE II - PRINCIPAL OFFICE, REGISTERED OFFICE AND AGENT

The principal office of this corporation is at 519 S.W. 11 Ave, Apt. 5 Miami, Fl. 33130, and the name of the registered agent of this corporation at that address is Marta B. Iglesias.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any lawful business.

ARTICLE IV - SHARES

This corporation is authorized to issue 100 shares of one Dollar (\$1.00) par value common stock.

ARTICLE V - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be either increased or diminished from time to time, in accordance with the by-law of the corporation, but shall never be less than one (1). The name and address of the initial director of the corporation is:

NAME

ADDRESS

519 S.W. 11 Ave. Apt. 5
Miami, FL 33130

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name and address of the persons signing these Articles of Incorporation is:

Marta B. Iglesias
519 SW 11 Ave
Miami, Fl 33130

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 Date

Signature / Incorporator W. J. Glesner Date 3/10/94