

P04000058982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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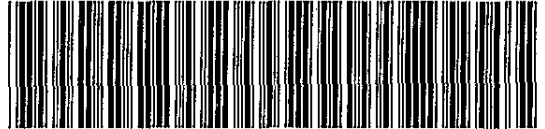
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## TRANSMITTAL LETTER

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

SUBJECT: Bella Donna Beauty Supply, 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: Diane Bonadonna  
Name (Printed or typed)

9028 NW 38<sup>th</sup> DR.  
Address

Coral Springs FL 33065  
City, State & Zip

954 304 4207  
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:

Bella Donna Beauty Supply, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

9028 NW 38<sup>th</sup> DR. Coral Springs FL 33065

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Distribution of beauty supplies

**ARTICLE IV SHARES**

The number of shares of stock is: 1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Diane Bonadonna 9028 NW 38<sup>th</sup> DR, Coral Sprin.  
FL 33065 (PRESIDENT)

**ARTICLE VI REGISTERED AGENT**

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

Diane Bonadonna 9028 NW 38<sup>th</sup> DR. Coral Sprin.  
FL 33065

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Diane Bonadonna 9028 NW 38<sup>th</sup> DR. Coral  
Springs FL 33065

\*\*\*\*\*  
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

Diane Bonadonna  
Signature/Registered Agent

3/29/03  
Date

Diane Bonadonna  
Signature/Incorporator

3/29/03  
Date

FILED  
04 APR -2 PM 12:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA