

PO4000062450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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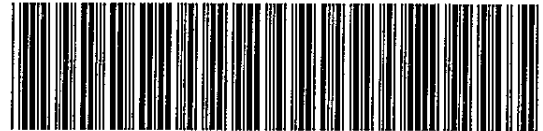
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/08/04--01021--011 **78.75

SEVENTH FLOOR
TALLAHASSEE, FLORIDA

04 APR -8 PM 2:27

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TRANSMITTAL LETTER

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

SUBJECT: Beauty Therapy, 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: Sylvia Peshev
Name (Printed or typed)

5253 55th Avenue North
Address

St. Petersburg, FL 33709
City, State & Zip

727-521-6278
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:

Beauty Therapy, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5253 55th Avenue North
St. Petersburg, FL 33709

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Service

ARTICLE IV SHARES

The number of shares of stock is:

100 shares of common stock with a par value of one dollar per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sylvia Peshev
5253 55th Avenue North
St. Petersburg, FL 33709
President

ARTICLE VI REGISTERED AGENT

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

Sylvia Peshev
5253 55th Avenue North
St. Petersburg, FL 33709
President

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sylvia Peshev
5253 55th Avenue North
St. Petersburg, FL 33709
President

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

Sylvia Peshev
Signature/Registered Agent

4.1.04
Date

Sylvia Peshev
Signature/Incorporator

4.1.04
Date