

P04000104428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

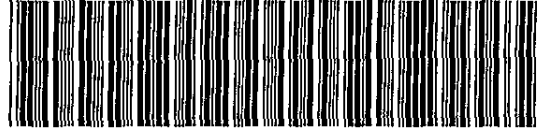
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF COURT

✓

8/7/1

Date 6/28/04

Division of Corporations

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

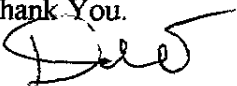
Dear Secretary of State,

Please be advised that I/we request approval to establish a corporation in the State of Florida with the name B.A. NAILS, INC
Enclosed are the original Articles of Incorporation and a check to cover the cost of filing fee and designation of a Registered Agent. The check amount is \$..87.50

Please return the enclosed copy of the Articles of Incorporation stamped with the filing date to the Registered Agent at the following address:

Name: HAIDO
Address: 4470 10th STREET
LAKEWORTH, FL 33461
Telephone No: 561-966-0032

Thank You.


Sincerely,


Registered Agent

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:

B.A. NAILS, INC

ARTICLE II - PRINCIPAL OFFICE

The principal place of business/mailing address is:

ADDRESS	4470 10th STREET		
CITY	LAKEWORTH	State	FL ZIP 33461

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is:

The transaction of any or all lawful business for which corporations may be incorporated under the Florida Corporation act.

ARTICLE IV - SHARES

The aggregate number of shares of stock is:

One hundred(100) of no par value

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

NAME	HUONG NGUYEN		
ADDRESS	4470 10TH STREET		
CITY	LAKEWORTH	State	FL ZIP 33461

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI - REGISTERED AGENT

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

NAME **HAI DO**

ADDRESS **4470 10TH STREET**

CITY **LAKEWORTH**

State **FL**

ZIP **33461**

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TALLAHASSEE
SECRETARY OF STATE

ARTICLE VII - INCORPORATOR

The name and address of the Incorporator is:

NAME **HUONG NGUYEN**

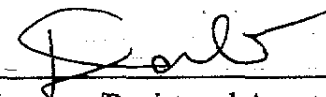
ADDRESS **4470 10TH STREET**

CITY **LAKEWORTH**

State **FL**

ZIP **33461**

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.

 6/28/04

Signature/Registered Agent Date

 6/28/04

Signature/Incorporator Date