

P04000118063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Alma 8-13-04

## TRANSMITTAL LETTER

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

**SUBJECT:** MAJOR LEAGUE BARBER SHOP 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:** DEMOIRA PRUDENT

Name (Printed or typed)

310 NE 162 ST

Address

MIAMI FL 33162

City, State & Zip

305-949-9304

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:

MAJOR LEAGUE BARBER SHOP INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

310 NE 162 ST (TEMPORARY)  
MIAMI FL. 33162

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

FOR PROFIT AND TO PROVIDE A QUALITY PRODUCT AND SERVICE TO THE COMMUNITY.

**ARTICLE IV SHARES**

The number of shares of stock is:

100 ONE HUNDRED SHARES OF STOCK

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

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

DEMOIRA PRUDENT AND GENDER PRUDENT  
310 NE 162 ST  
MIAMI FL. 33162

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

DEMOIRA PRUDENT  
310 NE 162 ST (TEMPORARY ON THE ADDRESS)  
MIAMI FL. 33162

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

DEMOIRA PRUDENT  
310 NE 162 ST (TEMPORARY ON THE ADDRESS)  
MIAMI FL. 33162

\*\*\*\*\*

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

Signature/Incorporator

FILED

04 AUG 13 AM 11:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Date

Date