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## TRANSMITTAL LETTER

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

SUBJECT:	Fairybairmott	ner.Inc		
	(PROPOSED CORPORAT	FE NAME – <u>MUST INCLI</u>	JDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	a check for:	
<b>ጆ</b> \$70.00	<b>□</b> \$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
	& Certificate of Status	& Certified Copy	& Certificate of	
		ADDITIONAL CO	Status PY REQUIRED	
		<u> </u>		
FROM: Natalie D. Calvaro / Fairyhairmother, Inc.				
(0601 SW 20th Pourt				
	Miramar I	= L 33003 State & Zip		
954.801.3190 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:  Fairy hairmother, Inc.	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  PLACE 8920 Taff Street  F BIZ: Pembroke Pines F133001 ADRESS:  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Conduct business in the corne	btalie D. Calvano, PD WOI SW 20th Court Wiramar, FL 33023 tology industry
ARTICLE IV SHARES The number of shares of stock is:	₹4. <b>2</b>
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	FILED 04 NOV -9 PM 3: 38 SEUNCIARY OF STAIL
Natalie D. Calvaro, President	- 6 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4
WEI SW 20th Court	नि प्र
Miramar, FL 33023	<u>ب</u> بي ص
ARTICLE VI REGISTERED AGENT	<u>ား</u> <b>ယ</b> ျွင်းရ <b>ထ</b>
The name and Florida street address of the registered agent is:	
Natalie D. Calvaro, President	
GOOI SW 30th Court	
Miramar, FL 33023  ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Natalie D. Calvaro	
GGOI SW 20th Court	
Miranar, FL 33033	*********
Having been named as registered agent to accept service of process for the above stated certificate. I am familiar with and accept the appointment as registered agent and agree to	
cerificação um famadar wan ana agree to	<i>,</i>
1 (atali Calvaria	11-5-0L
Signature/Registered Agent	Date .
A let whi (al want)	11-5-04
Signature/Incorporator	Date