

P0500000 4486

(Requestor's Name)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2005 JAN 10 P 2:49

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TRANSMITTAL LETTER

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

SUBJECT: SHEAR ARTISTRY, 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: DAWN GRICE  
Name (Printed or typed)

16221 LAKE SAUNDERS DRIVE  
Address

TAVARES, FL 32778  
City, State & Zip

352-589-9509  
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:

SHEAR ARTISTRY, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

4280 N. HWY 19A  
MOUNT DORA, FL 32757

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL BUSINESS RELATED  
TO THE OPERATION OF THE BEAUTY SALON.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000 SHARES

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

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

DAWN L. GRICE  
16221 LAKE SAUNDERS DRIVE  
TAUARES, FL 32778  
PRESIDENT / SECRETARY

BRENDA C. SMITH  
34 LAKE HENRY DRIVE  
LAKE PLACID, FL 33852  
VICE PRES / TREASURER

**ARTICLE VI REGISTERED AGENT**

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

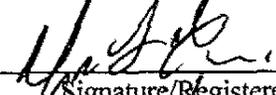
DAWN L. GRICE  
16221 LAKE SAUNDERS DRIVE  
TAUARES, FL 32778

**ARTICLE VII INCORPORATOR**

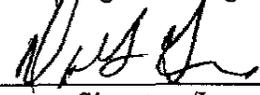
The name and address of the Incorporator is:

DAWN L. GRICE  
16221 LAKE SAUNDERS DRIVE  
TAUARES, FL 32778

\*\*\*\*\*  
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

1/6/05  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

1/6/05  
\_\_\_\_\_  
Date

FILED  
2005 JAN 10 P 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA