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V. Ingram
2/25/05

TRANSMITTAL LETTER

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

SUBJECT: M.A. CLASSIC MOBILE BARBER SALON, Corp.
(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: MR. DAIRICE ANDERSON
Name (Printed or typed)

6905 S.W. 38 ST
Address

MIRAMAR FL. 33023
City, State & Zip

(954) 987-7750
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 1, 2005

MR. MAURICE ANDERSON
6905 S.W. 38 ST
MIRAMAR, FL 33023

SUBJECT: M.A. CLASSIC MOBILE BARBER SALON CORP
Ref. Number: W05000005000

We have received your document for M.A. CLASSIC MOBILE BARBER SALON CORP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please remove the corporation name from the officer and director area.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Ingram
Document Specialist
New Filings Section

Letter Number: 205A00006929

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:

M. A. CLASSIC MOBILE BARBER SALON Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6905 SW. 38 ST,
MIRAMAR FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For Profit.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mr. MAURICE ANTHONY ANDERSON
6905 SW 38 ST, MIRAMAR FL, 33023

ARTICLE VI REGISTERED AGENT

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

MAURICE A ANDERSON
6905 SW 38 ST, MIRAMAR FL
33023.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Leron Hales
6905 S.W 38 ST.
MIRAMAR FL
33023

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

MA Anderson

Signature/Registered Agent

02/21/05.
Date

Leron Hales

Signature/Incorporator

02-21-05.
Date