

P05000132521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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(Business Entity Name)

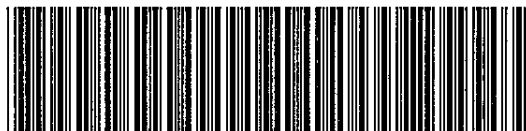
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05 SEP 28 PM 12:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 28 2005
J. STEVENSON

COVER LETTER

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

SUBJECT: Expressions Salon & Spa, 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: Tania Martins
Name (Printed or typed)

414 Brittany Circle
Address

Casselberry, FL 32707
City, State & Zip

407.310.7088
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 SEP 28 PM 12:15

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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:

Expressions Salon & Spa, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

414 Brittany Circle
Casselberry, FL 32707

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For Hair Salon.

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):

- Tania Martins, President, treasurer
414 Brittany Circle, Casselberry, FL 32707
- Paul Martins, Vice President, Secretary
414 Brittany Circle, Casselberry, FL 32707

ARTICLE VI REGISTERED AGENT

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

Tania Martins
414 Brittany Circle
Casselberry, FL 32707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tania Martins
414 Brittany Circle
Casselberry, FL 32707

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

Tania Martins
Signature/Registered Agent

Tania Martins
Signature/Incorporator

9/20/05
Date

9/20/05
Date

FILED
05 SEP 28 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA