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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10/14/05--01023--013 \*\*78.75

10/17/05  
BWK

## TRANSMITTAL LETTER

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

**SUBJECT:** Tina's Beauty Supply & Salon, Corp  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

- |                                  |   |                                   |  |
|----------------------------------|---|-----------------------------------|--|
| <input type="checkbox"/> \$70.00 | <input checked="" type="checkbox"/> \$78.75 | <input type="checkbox"/> \$122.20 | <input type="checkbox"/> \$131.25              |
| Filing Fee                       | Filing Fee<br>& Certificate                 | Filing Fee<br>& Certified Copy    | Filing Fee,<br>Certified Copy<br>& Certificate |

**FROM:** ANGIE M. LOBO  
Name (Printed or typed)

556 HIALEAH DRIVE  
Address

HIALEAH, FL. 33010  
City, State & Zip

(786) 5974425  
Daytime Telephone Number

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

# ARTICLES OF INCORPORATION

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 607, Florida Statutes, adopt(s) the following Articles of Incorporation:*

## ARTICLE I

### Name

The name of the corporation shall be:

Tina's Beauty Supply & Salon, Corp

## ARTICLE II

### Principal place of business and mailing address

The principal place of business and the mailing address of this corporation shall be:

556 HIALEAH DRIVE

HIALEAH, FL. 33010

## ARTICLE III

### Purpose(s)

The specific purpose(s) for which the corporation is organized is (are):

THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR  
BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED  
STATES AND THE STATE OF FLORIDA

## ARTICLE IV

The officers of the corporation shall be:

President: ANGIE M. LOBO  
Secretary: ALEX J. MARTINEZ  
Treasurer: ANGIE M. LOBO

Filing Fee &

CERTIFICATE: \$78.75

## ARTICLE V

### Limitation of Corporate Powers

The corporate powers of the corporation are as provided in Section 607 Florida Statutes, unless limited as follows:

The Corporation shall have the same powers as an individual to do all things necessary or convenient to carry out its business and affairs, subject to any limitations or restrictions imposed by applicable law or these Articles of Incorporation.

## ARTICLE VI

### Initial registered agent and street address

The name and the street address of the initial registered agent is:

\_\_\_\_\_  
ANGIE M. LOBO

\_\_\_\_\_  
556 HIALEAH DRIVE

\_\_\_\_\_  
HIALEAH, FL. 33010

## ARTICLE VII

### Incorporators

See instructions for officers/directors

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is (are):

\_\_\_\_\_  
ANGIE M. LOBO

\_\_\_\_\_  
556 HIALEAH DRIVE

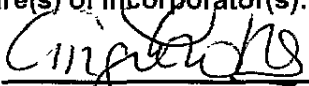
\_\_\_\_\_  
HIALEAH, FL. 33010

## ARTICLE VIII

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000 Shares.

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 8th day of October 2005 .

Signature(s) of incorporator(s):



\_\_\_\_\_  
ANGIE M. LOBO

\_\_\_\_\_  
Typed name of incorporator signing

\_\_\_\_\_  
Typed name of incorporator signing

\_\_\_\_\_  
Typed name of incorporator signing

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION REGISTERED  
AGENT/REGISTERED OFFICE**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Tina's Beauty Supply & Salon, Corp  
(must include suffix)

2. The name and address of the registered agent and office is:

ANGIE M. LOBO  
(Name)

(Street address - P.O. Box or Mail Drop Box NOT acceptable)

556 Hialeah Dr Hialeah, FL 33010  
(City/State/Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Signature)

10/05/05  
(Date)