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COVER LETTER

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

SUBJECT:	MINA ROMIO, INC.				
	ATE NAME – <u>MUST INC</u>	JUDE SUFFIX)			
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:		
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		
FROM:		IA PERROTTA (Printed or typed)			
_		183rd. ST., #209 Address	9		
	AVENTURA, FL 33160 City, State & Zip				
		223-9914 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:

MINA ROMIO, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2780 N.E. 183rd. STREET, Suite 209 AVENTURA, FL 33160

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO BE ENGANGED IN THE COSMETOLOGIST BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares at a par value of \$1.00 each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROMINA PERROTTA, 2780 NE 183rd. STREET, # 209, AVENTURA, FL 33160. PRESIDENT, SECRETARY. TREASURER

ARTICLE VI REGISTERED AGENT

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

ROMINA PERROTA, 2780 NE 183rd. STREET, #209, AVENTURA, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROMINA PERROTTA, 2780 NE 183rd. STREET, #209, AVENTURA, FL 33160

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

signature/Incorporator

Date 9/70/05

Data

FILED 05 OCT 18 AM