

P06000003268

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

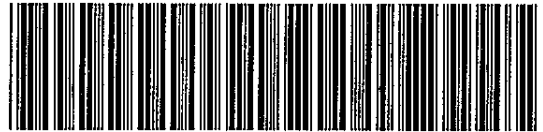
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 JAN -6 AM 9:26

FILED

COVER LETTER

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

SUBJECT: Nails by Cathy, 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

<input type="checkbox"/> \$78.75	<input checked="" type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL COPY REQUIRED	

FROM: Cathy Saviano

Name (Printed or typed)

500 SW 62nd Terrace

Address

Margate, FL 33068

City, State & Zip

954-968-6891

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:

Nails by Cathy, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

500 SW 62nd Terrace Margate Fl 33068

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Beauty Services

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):

Cathy Saviano, 500 SW 62nd Terrace Margate Fl 33068, President

ARTICLE VI REGISTERED AGENT

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


Cathy Saviano 500 SW 62nd Terrace Margate Fl 33068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cathy Saviano 500 SW 62nd Terrace Margate Fl 33068

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

1-3-06
Date

1-3-06
Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA