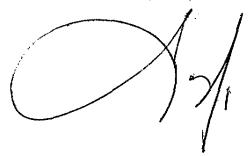
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(Requestor's Name)	_
(Address)	
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(City/State/Zip/Phone #)	—
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Tertified Copies Certificates of Status	_
Special Instructions to Filing Officer:	7







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# **COVER LETTER**

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

SUBJECT:	MIGIT'S HAIR SUPPLY  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
Enclosed are an ori	ginal and one (1) copy of the artic			
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  PY REQUIRED	
FROM:		LON C. BELL (Printed or typed)		ar , jë er
They's		BOX 010586	<u>%</u>	• • •
		LORIDA 33101 State & Zip	<u>,                                     </u>	
		5-458-2942 elephone number	<u> </u>	iri i yr e

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



January 19, 2006

MARLON C. BELL PO BOX 010586 MIAMI, FL 33101

SUBJECT: MIGIT'S HAIR SUPPLY Ref. Number: W06000002452

We have received your document for MIGIT'S HAIR SUPPLY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6933.

Dale White Document Specialist New Filing Section

Letter Number: 006A00003704

# · 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:

MIGIT'S HAIR SUPPLY INC.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Business Address: 17240 NW 27 Ave, Miami, FL 33056 Mailing Address: P.O. Box 010586, Miami, FL 33101

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Distribution of Hair and Beauty Supplies

### 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):

Marion C Bell P.O. Box 010586 Miami, FL 33101

## ARTICLE VI REGISTERED AGENT

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

Frances Williams 1467 NW 155 St Opa Locka, FL 33054

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Marlon C. Bell P.O. Box 010586 Miami, FL 33101

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

01/09/06
Date
01/09/06
Date

OS JAN 30 PM 3: 11