Florida Department of State

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To:

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Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

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FLORIDA PROFIT/NON PROFIT CORPORATION

NEW YORK STYLE INC

Certificate of Status	0
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Louis FEB Livides

February 14, 2006

FLORIDA DEPARTMENT OF STATE Division of Corporations

FAS-T CORP

SUBJECT: NEW YORK STYLE INC

REF: W06000007179

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

If you have any further questions concerning your document, please call (850) 245-6928.

Tim Burch Document Specialist New Filing Section FAX Aud. #: H06000037537 Letter Number: 406A00010572

ARTICLES OF INCORPORATION OF

NEW YORK STYLE INC

The undersigned incorporator (s), for the purpose of forming a corporation Under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE LNAME

The name of the corporation shall be: NEW YORK STYLE INC

The principal place of business of this corporation shall be:

6230 PEMBROKE ROAD PEMBROKE PINES, FL 33023 ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation. BEAUTY SALON

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 100 SHARES @ 1.00 PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This Corporation is to exist perpetually.

ARTICLE V OFFICES DIRECTORS

The name(s) and street address (es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor (s) is (are) elected, is are

JUAN CARLOS MARTINEZ 100% PRESIDENT 6230 PEMBROKE ROAD PEMBROKE PINES , FL 33023

ARTICLES VI INCORPORATOR (S)

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

JUAN CARLOS MARTINEZ 6639 PEMBROKE ROAD PEMBROKE PINES, FL 33023

in witness wi	IEREOF, the undersigned	i incorporator (s)	has (have)
Executed these Ar	rticles of Incorporation this	8TH	
Day ofF	EBRUARY 2006		

Signature (3) of Incorporator (s)

CERTICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the Undersigned Corporation, organized under the laws of the State of Florida Submits the following statement in designating the registered office / registered Agent, in the State of Florida.

	of the corporation is:		<u> </u>	
The name <u>a</u>	ind address of the re	gistered ager	nt and office is	
	JUAN CARLO	S MARTIN	TEZ	
· · · · · · · · · · · · · · · · · · ·	6639 PE	(NAME) MBROKE R	OAD	
	(P.O. BOX) PEMBROKE !	NOT ACCER		
	CIT	Y/STATE/ZI	P)	

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 APPOITMENT AS REGISTEREDAGENT AND AGREE TO ACT IN THIS CAPACITY, I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THEPROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE ALAN DANOS MALTINES