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(Requ	ıestor's Name)	
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PICK-UP	WAIT	MAIL
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(Docu	ıment Number)	
Certified Copies	Certificates	of Status
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Special Instructions to Fil	ing Officer:	

Office Use Only



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SECRETARY OF STATE A

. . . COVER LETTER

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

	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	d a check for:
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of

ADDITIONAL COPY REQUIRED

SUBJECT: Imani Hair & Nails INC

FROM: Jana C Garner
Name (Printed or typed)

3590 NW Yand 9+
Address

Laudurdale Lakes F1 33309

City, State & Zip

(954) 588-0897 (954)486 1750

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)	FII -
ARTICLE I NAME	FILED
ARTICLE I NAME The name of the corporation shall be: TAMANI Hair PRINCIPAL OFFICE	2006 FEB 23 P 1: 55
I mani Hair alla IN	C FEB 23 P 1. ==
TAIN FIGURE	ECRETARY OF
	-LAHASSEE, FLORIE
ARTICLE II PRINCIPAL OFFICE	LURIDA
The principal place of business/mailing address is:	
3590 NW 42ndst	
Laududale lakes Florida	
ARTICLE III PURPOSE 3330	
The purpose for which the corporation is organized is:	•
Manicure & Pedicure	:
-	
ARTICLE IV_ SHARES	
The number of shares of stock is:	
1 share	
1 5 har	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
The name and Florida street address (P.O. Box NOT acceptable) of the r Jana Garner 3590 NW 42175+ Lauderdale Lakes, Florid	-
ARTICLE VII INCORPORATOR	3350 1
The name and address of the Incorporator is: Jana C Go	rnor-
3590 NW4	
Laududale (
	33309

Having been named as registered agent to accept service of process for the above stated	
certificate, I am familiar with and accept the appointment as registered agent and agree to	4 a dii alida - ito
	to act in this capacity
Lange C. Stranda	to act in this capacity
Signature/Registereds/Agent	25 200%
Signature/Registered/Agent	Date
Signature/Registered/Agent Signature/Incorporator	to act in this capacity $ \frac{\frac{1}{25} \int 20060}{Date} $ $ \frac{1}{25} \int 70060$