P06000079603

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

Office Use Only



700075992057

06/09/06--01017--012 **87.50

SECKETARY OF STATE FALL AHASSEF FLORID

114

COVER LETTER

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

SUBJECT:	AFRIHAIR SALONS, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	l a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM:	Name	E. MCCLOUD (Printed or typed)	
	Address PLANT CITY, FLORIDA 33565 City, State & Zip		
	(813) 567-5580 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:

AFRIHAIR SALONS, INC.

06 JUN - 9 PM 4: 46

SECRETARY OF STATE TALL AHASSEE FLORIDA

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

1224 EAST FOWLER AVE. TAMPA, FLORIDA 33612

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

TO PROVIDE COSMETOLOGY SERVICES AND PRODUCTS TO THE GENERAL PUBLIC

ARTICLE IV SHARES

The number of shares of stock is:

THE MAXIMUM NUMBER OF SHARES THAT THIS ORGANIZATION SHALL HAVE IS 3300 (THREE THOUSAND THREE HUNDRED)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARK E. MCCLOUD, PRESIDENT

MARK J. MCCLOUD, VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

MARK E. MCCLOUD 2805 CHARRO LANE

PLANT CITY, FLORIDA 33565

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARK E. MCCLOUD 2805 CHARRO LANE

PLANT CITY, FLORIDA 33565

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

Nack E. Mc Claud

Signature/Incorporator