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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
7/18

COVER LETTER

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

SUBJECT: ANGELA'S DESIGNS, 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

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: ANGELA WARREN
Name (Printed or typed)

10526 N.W. 10th STREET
Address

PLANTATION, FL 33322
City, State & Zip

954-325-8122
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:

ANGELA'S DESIGNS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. BOX 450178
SUNRISE, FL 33345-0178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HAIR

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANGELA WARREN / OWNER
P.O. BOX 450178
SUNRISE, FL 33345-0178

ARTICLE VI REGISTERED AGENT

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

ANGELA WARREN
10526 N.W. 10th STREET
PLANTATION, FL 33322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANGELA WARREN
P.O. BOX 450178
SUNRISE, FL 33345-0178

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

Angela L. Warren
Signature/Registered Agent

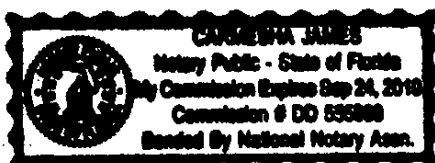
7-12-06

Date

Angela L. Warren
Signature/Incorporator

7-12-06

Date



James, 7/12/06
Personally Known ✓
FL Dr L. W 650-012-68-708-0