

P0600011897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

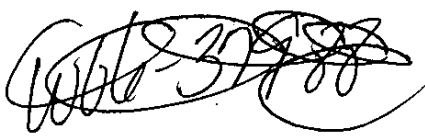
PICK-UP WAIT MAIL

(Business Entity Name)

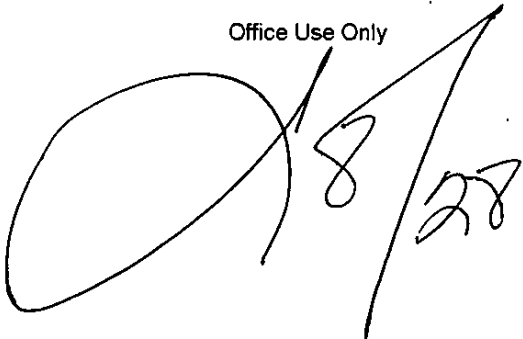
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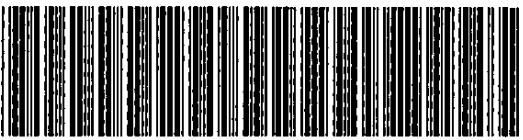
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



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06 AUG 28 PM 3:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Fabian, 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: Fabian A. Gonzalez

Name (Printed or typed)

7910 Pines Boulevard

Address

Pembroke Pines, Florida, 33024

City, State & Zip

954-249-0508

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:

Fabian, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7910 Pines Boulevard, Pembroke Pines, Fl, 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Full Service Beauty Salon

ARTICLE IV SHARES

The number of shares of stock is:

100 one hundred shares, at a \$1.00 one dollar each.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Director : Fabian A. Gonzalez- 7228 Taft Street, Hollywood, Fl, 33024

ARTICLE VI REGISTERED AGENT

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

Fabian A. Gonzalez, 7228 Taft Street, Hollywood, Fl, 33024

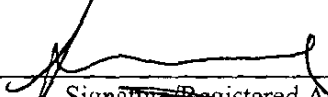
ARTICLE VII INCORPORATOR

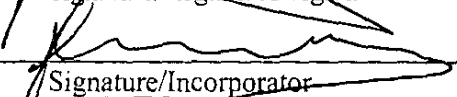
The name and address of the Incorporator is:

Fabian A. Gonzalez, 7228 Taft Street, Hollywood, Fl, 33024

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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


Signature/Incorporator

8/25/06
Date
8/25/06
Date