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SLURLIARY OF STATE
TALLAHASSEE, FLORID

cover letter

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

SUBJECT: Fabian, Inc		
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the article	eles of incorporation and	l a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
_{FROM:} Fabian A. Gonzalez		
Name	(Printed or typed)	
7910 Pines Boulevard		
,	Address	
Pembroke Pines, Floric		
City,	State & Zip	_
954-249-0508		
Daytime T	elephone 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/mailing 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.

INITIAL OFFICERS AND/OR DIRECTORS

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

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

INCORPORATOR ARTICLE VII

The <u>name and address</u> of the Incorporator is:

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

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/Incorporator

8/25/06 Pate 8/25/06