

PO6000126628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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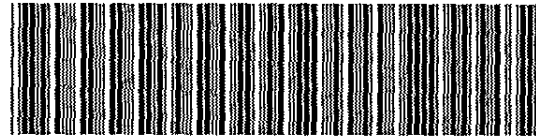
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECTION 10.000  
FALL 2006

*20*

## COVER LETTER

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

SUBJECT: TIPS 'N TOES, 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: DEBORAH H. HALLIGAN  
Name (Printed or typed)

11246 SE 97th TERRACE  
Address

SUMMERFIELD, FL 34491  
City, State & Zip

CELL PHONE # (352) 350-4385  
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:

TIPS 'N TOES, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17246 SE 9TH TERRACE  
SUMMERFIELD, FL 34148

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANICURES + PEDICURES

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DEBORAH H. HALLIGAN  
PRES. AND DIRECTOR  
17246 SE 9TH TERRACE  
SUMMERFIELD, FL 34148

## ARTICLE VI REGISTERED AGENT

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

DEBORAH H. HALLIGAN  
17246 SE 9TH TERRACE  
SUMMERFIELD, FL 34148

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DEBORAH H. HALLIGAN  
17246 SE 9TH TERRACE  
SUMMERFIELD, FL 34148

\*\*\*\*\*

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

✓ Deborah H. Halligan  
Signature/Registered Agent

Sept. 21, 2006  
Date

✓ Deborah H. Halligan  
Signature/Incorporator

Sept. 21, 2006  
Date

FILED  
06 SEP 29 AM 10:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA