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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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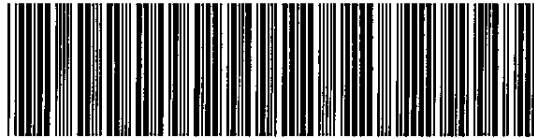
(Business Entity Name)

(Document Number)

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

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07 MAR 28 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3/28/07 MAR 29 2007

## TRANSMITTAL LETTER

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

SUBJECT: MURPHY'S BEAUTY & BARBER, INC.  
(Proposed corporate name - must include suffix)

Enclosed is 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: A BETTER BUSINESS & TAX SERVICE  
Name (Printed or typed)

600 Goodlette Road North, Ste. 104  
Address

Naples, FL 34102  
City, State & Zip

941-263-0829  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 MAR 28 PM 12:07

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NOTE: Please provide the original and one copy of the articles.

**MURPHY'S BEAUTY & BARBER, INC.**  
**509 WEST MAIN STREET**  
**IMMOKALEE, FLORIDA 34142**  
MAILING ADDRESS:  
**P.O. BOX 3424**  
**IMMOKALEE, FLORIDA 34143**

Department of State-Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Filing of Articles of Incorporation for **MURPHY'S BEAUTY & BARBER, INC.**

Dear Sirs:

I enclose the original of the Articles of Incorporation for **MURPHY'S BEAUTY & BARBER, INC.** Further enclosed is my check in the amount of \$78.75 payable to the Florida Department of State.

Please file the original of the Articles and return your receipt and Certified Copy.

If you have any further questions or require additional information, please do not hesitate to contact me.

Thank you for your assistance in this matter.

Very truly yours,

  
LAUREN ESQUIVEL, President

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

HW/jaa

Enclosures

Fees as follow:

Certified Copy  
Filing Fee for Articles  
Registered Agent

**ARTICLES OF INCORPORATION  
Of**

**MURPHY'S BEAUTY & BARBER, INC.**

The undersigned, for the purposes of forming a Corporation under Section 607.164 of the Florida General Corporation Act, do hereby certify as follows:

**Article I**  
**Corporate Name and Address**

The name of the Corporation is **MURPHY'S BEAUTY & BARBER, INC.**, and the street address of the Corporation is:

**509 WEST MAIN STREET  
IMMOKALEE, FLORIDA 34142**

**Article II**  
**Corporate Purposes**

The Corporation is organized to function as **BEAUTY SALON** and any related business services and to otherwise engage in any activity or business permitted under the laws of the United States of America and in the state of Florida.

**Article III**  
**Authorized Stock**

The aggregate number of shares of the Corporation shall be 50,000, of which 50,000 are to be issued as voting common stock with a par value of \$1.00.

**Article IV**  
**Registered Office and Registered Agent**

The street address of the initial registered office of the Corporation in the state of Florida shall be:

**509 WEST MAIN STREET  
IMMOKALEE, FLORIDA 34142**

The name of the initial registered agent of the Corporation at the registered office shall be **LAUREN ESQUIVEL**.

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TALLAHASSEE, FLORIDA

**Article V**  
**Initial Board of Directors**

The initial Board of Directors of the Corporation shall be comprised of **ONE (1)** person. The name and address of the initial Director(s) is as follows:

<u>NAME</u>	<u>ADDRESS</u>
<b>LAUREN ESQUIVEL</b>	<b>602 6<sup>TH</sup> AVENUE CIRCLE IMMOKALEE, FLORIDA 34142</b>

**Article VI**  
**Incorporator**

The name and address of the Incorporator of the Corporation is:

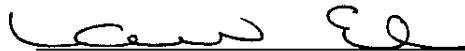
**LAUREN ESQUIVEL  
602 6<sup>TH</sup> AVENUE CIRCLE  
IMMOKALEE, FLORIDA 34142**

**Article VII**  
**Commencement of Existence**

The Corporation shall be deemed to commence on the **26<sup>TH</sup>** day of **MARCH**,  
**2007.**

**Article VIII**  
**Duration**

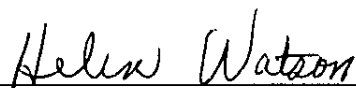
The term of existence of the Corporation is perpetual. IN WITNESS WHEREOF, the undersigned, as Incorporator has executed the foregoing Articles of Incorporation this **22<sup>ND</sup>** day of **MARCH, 2007**.

  
**LAUREN ESQUIVEL**  
Incorporator

STATE OF FLORIDA

COLLIER COUNTY

Before me personally appeared **LAUREN ESQUIVEL** to me personally known to be the person described as Incorporator and who executed the foregoing Articles of Incorporation and acknowledged before me that **she** subscribed to these Articles of Incorporation this **22<sup>ND</sup>** day of **MARCH, 2007**.

  
Notary Public, Helen Watson  
My Commission Expires: 10-20-2009

**ACCEPTANCE OF REGISTERED AGENT  
FOR**

**MURPHY'S BEAUTY & BARBER, INC.**

I , **LAUREN ESQUIVEL**, having signed the within as registered agent of **MURPHY'S BEAUTY & BARBER, INC.**, (the Corporation) at the registered address of **509 WEST MAIN STREET, IMMOKALEE, FLORIDA 34142**, do hereby agree as the registered agent to accept service of process, to keep an office of the Corporation open during the prescribed hours, and to post my name, **LAUREN ESQUIVEL**, and that of any officer of the Corporation authorized to accept service of process at the above Florida designated address, in some conspicuous place in the office of the Corporation as required by law.



**LAUREN ESQUIVEL**  
Registered Agent

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**