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SECRETARY OF STATE

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## **COVER LETTER**

FILED

07 APR 23 AM 11: 44

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT: Liovana Inc.			
(PROPOSED CORPORAT	E NAME – <u>MUST INCLUDE SUFFIX</u> )		
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:			
S70.00 F. 18.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED		
FROM: Joanne Biritter, Name (Printed or typed)			
4523 N.W. 14" AVC			
Coral Springs FLA. 33065 (0571) 027 - 6185			
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 FILED The name of the corporation shall be: Giovanna INC. 07 APR 23 MI 11: 44 SECRETARY OF STATE ARTICLE II PRINCIPAL OFFICE TALLAHASSEE, FLORIDA The principal place of business/mailing address is: 4523 N.W. 74th Ave Coral springs, FLA. 33005 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Cosmotology ARTICLE IV SHARES The number of shares of stock is: 100 <u> ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS</u> List name(s), address(es) and specific title(s): . ,, Joanne Birittieri REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: mal son ngs, FLA ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Joanne Birithen 4523 NW 74th Ave Coal Springs, FLA 33065 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