(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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ARTICLES OF INCORPORATION of

LUCY MAILS INC.
(Name of corporation)
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.
ARTICLE I – CORPORATION NAME
The name of the corporation is:
LUCY NAILS INC.
ARTICLE 11 DURATION
This corporation shall exist perpetually unless dissolved according to Florida law.
ARTICLE III – PURPOSE
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.
ARTICLE IV – CAPITAL STOCK
The corporation is authorized to issue shares (/△△△) of ONE Dollar(s) (\$_/.▷□) per value Common Stock, which shall be designated "Common Shares."
ARTICLE V – INIITAL REGISTERED OFFICE AND AGENT
The street address of the initial Registered Agent and the name of the initial Registered Agent at that officé is:
Name: ROBERT W WYMAN
Address: 5641 WALTHAM WAY
City: LAKE WORTH , Florida Zip: 33463-6607
The principal office, if known, or the mailing address of the corporation is: Name: ROBERT WWYMAN
Address: 5641 WALTHAM WAY
City: LAKE WORTH , FL Zip: 33443-6607

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have number of directors may be ethe Bylaws, but shall never be	either increased or diminishe	ed from time to time by
the initial director(s) of the corp	poration are as follows:	
Name: PHUONG Address: 1103 PINE WOOD City: WEST PALM BEI	D LAKE COURT	
Olly. WEST PHETTI BET	HCH STATE. FLOKT	DH ZIF. 33736
Name: HO PHI HQL		
Address: 1103 PINEWO		
Ony. WEST PACITY	SEHEH SIMIL. FLOKIE	7H ZIF. 33736
Name:		
Address:		7!D:
Oity	SIAIL.	ZII「,
ARTIC	LE VII – INCORPORATORS	3
The names and addresses incorporation are as follows:	, -	-
Name: ROBERT W	MAMKM	
Address: 5641 WALTH	STATE: FLOR 1	DA 71P-334/3-//07
		· .
Name:		
Address:City:	STATE:	7IP:
	-	
Name:		
Address:City:	STATE:	ZIP:
	,	
IN WITNESS WHEREOF, the Articles of Incorporation this _		
	Prent of oky	<u>~~~</u> (SEAL)
	0	(SEAL)
		(SEAL)

CERTIFICATE AND ACKNOWLEDGMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

LUCY NAILS INC(hours of corporation)

FEG. 7

FEG. 7

FEG. 8

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at	Luc)	NAILS	INC.			·	
: .5	641 V	<i>プロトナン</i> ロV	YAW C				•
has named_	LAKE	WORTH	FL, 33	+63-66	07		•
located at t	he aforesaid	iddress, as its R	egistered Agen	t to accept se	rvice of	process	within
this state.	•		•	* •			

ACKNOWLEDGMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Polit W Nyman (registered ogeni)