

P08000006203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

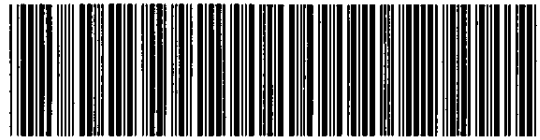
(Business Entity Name)

(Document Number)

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

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FILED  
2008 JAN 16 PM 4: 25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch JAN 17 2008

TRANSMITTAL LETTER

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

SUBJECT: STYLES BY MELANIE, 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: MELANIE J. WARDEN  
Name (Printed or typed)

2990 LAKE CHILTON DR.  
Address

AVON PARK, FLA. 33825  
City, State & Zip

863-453-6255  
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:

STYLES BY MELANIE, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2990 LAKE CHILTON DR.  
AVON PARK, FLA. 33825

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

BEAUTY SALON

**ARTICLE IV SHARES**

The number of shares of stock is:

5000 SHARES OF COMMON STOCK WITH \$1 PAR VALUE PER SHARE

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

MELANIE J. WARDEN, DIRECTOR & PRESIDENT  
2990 LAKE CHILTON DR.  
AVON PARK, FLA. 33825

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

MELANIE J. WARDEN  
2990 LAKE CHILTON DR.  
AVON PARK, FLA. 33825

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

MELANIE J. WARDEN  
2990 LAKE CHILTON DR.  
AVON PARK, FLA. 33825

\*\*\*\*\*  
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

Melanie Warden

Signature/Registered Agent

1/15/08

Date

Melanie Warden

Signature/Incorporator

1/15/08

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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