

P08.000026061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800118294808

03/11/08--01018--011 \*\*78.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 MAR 11 AM 8:40

ep 3/12/08

## COVER LETTER

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

SUBJECT: DELORES SMITH, 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: Delores Smith, Inc.

Name (Printed or typed)

320 Lakeview St., Apt. 208

Address

Orlando, Florida 32804

City, State & Zip

407-435-5591

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:

**Delores Smith, Inc.**

### **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailing address is:

**320 Lakeview St., Apt. 208, Orlando, Florida 32804**

### **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

To conduct and transact generally the business of a corporation and to do all things and exercise all powers and perform all functions that a corporation is authorized or empowered to do, exercise, or perform under and by virtue of the laws of Florida, or that it may be by law hereafter authorized to do, exercise, or perform hair styling and other purposes; and do all the above things as a corporation and insofar as is consistent with the laws of Florida.

### **ARTICLE IV      SHARES**

The number of shares of stock is:

**100 shares of \$1.00 par value common stock**

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

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

**Delores Smith, President  
320 Lakeview St.  
Orlando, Florida 32804**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 MAR 11 AM 8:40

**ARTICLE VI REGISTERED AGENT**

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

Delores Smith  
320 Lakeview St.  
Orlando, Florida 32804

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Delores Smith  
320 Lakeview St.  
Orlando, FL 32804

\*\*\*\*\*

*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*

*Delores Smith*

Signature/Registered Agent

*Delores Smith*

Signature/Incorporator

*3/7/08*

Date

*3/7/08*

Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 MAR 11 AM 8:40