

P08000033022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

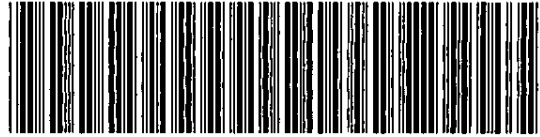
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000121190610

03/31/08--01026--025 **87.50

FILED
08 MAR 31 PM 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VA

COVER LETTER

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

SUBJECT: IKandi Beauty & Spa 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: Kandace Bowens

Name (Printed or typed)

7210 Westpointe Blvd Apt 1317

Address

Orlando, FL 32835

City, State & Zip

(773) 587-5093

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:

IKandi Beauty & Spa Inc

ARTICLE II PRINCIPAL OFFICE

The principle street address and mailing address, if different is:

7210 Westpointe Blvd Unit 1317
Orlando, FL 32835

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS,
INCLUDING COSMETIC BEAUTY RETAILER AND SPA SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Title: CEO
Kandace Bowens
7210 Westpointe Blvd Unit 1317
Orlando, FL 32835

ARTICLE VI REGISTERED AGENT

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


Kandace Bowens
7210 Westpointe Blvd Unit 1317
Orlando, FL 32835


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kandace Bowens
7210 Westpointe Blvd Unit 1317
Orlando, FL 32835

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/Registered Agent


Signature/Incorporator

3/27/08
Date
3/27/08
Date

FILED
08 MAR 31 PM 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA