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#### TRANSMITTAL LETTER

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

SUBJECT:	P.M. BEAUTY SUPPLY 99 $m{c}$ PLUS, INC.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )		
Enclosed are an orig	inal and one (1) copy of the artic	cles 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		& Certificate of Status		
		ADDITIONAL CO			
FROM:	Philomise Marcellus, Registered Agent				
1 KOW	Name (Printed or typed)				
	13387 Memorial Hwy				
	Address				
	North Miami, Florida 33161				
	City, State & Zip				
	(305)893-7791				
Daytime Telephone number					

NOTE: Please provide the original and one copy of the articles.



March 11, 2008

PHILOMISE MARCELLUS 13387 MEMORIAL HWY NORTH MIAMI, FL 33161

SUBJECT: P.M. BEAUTY SUPPLY 99 C PLUS, INC.

Ref. Number: W08000012846

We have received your document for P.M. BEAUTY SUPPLY 99 C PLUS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The C symbol cannot be typed from our keyboard, just as you were unable to type it from your keyboard. You may, however, use the word CENT in it's place.

I was unable to contact you by telephone.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Regulatory Specialist II New Filing Section

Letter Number: 408A00014917

### **Articles of Incorporation**

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation:

#### **FIRST**

The name of the corporation is: P.M. BEAUTY SUPPLY 99 CENT PLUS, INC.

#### **SECOND**

The period of its duration is Indefinite.

#### **THIRD**

The purpose of the corporation is: Retail outlet stores

#### **FOURTH**

The aggregate number of authorized shares is 200 shares Par-Value \$5.00

#### **FIFTH**

The corporation will not commence business until at least One Thousand (\$1,000.) Dollars have been received by it as consideration for the issuance of Shares.

#### **SIXTH**

Cumulative Voting of shares of stock are authorized.

#### SEVENTH

Provisions Limiting or denying to shareholders the preemptive right to acquire additional or treasury shares of the corporation are: Approved by both the Stockholders and Board of Directors.

#### **EIGHT**

Provisions for regulating the internal affairs of the corporation are The Managing Partners (Corporate Officers) will be responsible for all day to day operation.



## FILED

#### **NINTH**

The address of the initial Registered Office of the corporation is: APR - 9 P 12: 53
861 N.E. 209 Terrace North Miami Beach, Apt 206 Florida 33 STECRETARY OF STATE and the name of it's initial Registered Agent at such address is LAHASSEE. FLORIDA Philomise Marcellus

#### TENTH

Address of the principal place of business is: 13387 Memorial Hwy North Miami, Florida 33161

#### **ELEVENTH**

The number of directors constituting the initial board of directors of the corporation is Three, and the names and address of the persons who are to serve as directors until the first annual meeting of the Shareholders or until their successors are elected and shall qualify are:

<u>NAME</u> <u>ADDRESS</u>

\* Philomise Marcellus, Dir/Pres

861 N.E. 209 Terrace North Miami Beach, Apt 206 Florida 33179

#### **TWELFTH**

The name and address of each incorporator is:

NAME ADDRESS

\* Philomise Marcellus, Dir/Pres

861 N.E. 209 Terrace North Miami Beach, Apt 206 Florida 33179

Date: February 27, 2008

Philomise Marcellus, Incorporator

Having been named as Registered Agent and to accept services of process for the stated corporation at the place designated in this certificate, I hereby accept the appointment as Registered Agent and Agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, my position as Registered Agent.

Philomise Marcellus, Registered Agent

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SECRETARY OF STATE
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