

PD80000 745/2

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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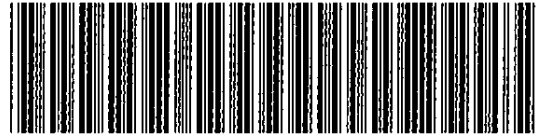
(Business Entity Name)

(Document Number)

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2008 AUG - 8 P 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG - 8 2008
D.A. WHITE

COVER LETTER

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

SUBJECT: SELINA BEAUTY SALON 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: SELINA BEAUTY SALON INC.

Name (Printed or typed)

419 SOUTH MAIN STREET

Address

LABELLE FL 33935

City, State & Zip

863 675-0131

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)

FILED

2008 AUG -8 P 3: 50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Selina Beauty Salon Inc.

ARTICLE II PRINCIPAL OFFICE

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

Principal Address : 419 S Main Street
LaBelle, FI 33935

Mailing Address: 4058 Rainbow Circle
LaBelle, FI 33935

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

The maximum number of shares that this Corporation is authorized to have outstanding at any time is ONE THOUSAND (1,000) shares of common stock, each share having the par value of ONE DOLLAR (\$1.00)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Lilia P. Nunez

4058 Rainbow Circle
LaBelle, FI 33935

President

ARTICLE VI REGISTERED AGENT

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

Lilia P. Nunez

4058 Rainbow Circle
LaBelle, FI 33935

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Francisco Valle

2015 Schooner Dr.
LaBelle, FI 33935

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

Lilia P Nunez

Signature/Registered Agent

8/05/08

Date

Francisco Valle

Signature/Incorporator

8/05/08

Date