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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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## **COVER LETTER**

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

SUBJECT:	The HAIRBUZZ REVEN	IVE INCREASE	R, INCORPORATEL	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	l a check for:	
\$70.00	<b>∑</b> \$78.75	□ \$78.75	□ \$87.50	
	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy		
		a comme copy	& Certificate of	
			Status	
		ADDITIONAL COPY REQUIRED		
FROM:	MARGARETA C L.	040		
	Name (	(Printed or typed)		
	2808 UMBRELLA	IREE DR		
		Address	<del></del>	
	EDGEWATER TL 32141  Any  Any			
	/ City,	State & Zip		
	386 - 424 - 0822 Daytime T	386 -663-8	3058	
	Daytime T	elephone 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: THE HAIRBUZZ REVENUE INCREASER INCORPORATED ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 2808 UMBRELLA TREE DRIVE, EDGENATER, FL 32/41 <u>ARTICLE III PURPOSE</u> The purpose for which the corporation is organized is: TO MARKET MARKETING MATERIAL TO GALONS ARTICLE IV SHARES The number of shares of stock is: 1,000 INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V List name(s), address(es) and specific title(s): MARGARETA C LOYD REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: MARGARETA C LOYD 2808 UMBRELLA TREE DR., EDGEWATER, FL 32141 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: MARGARETA O LOYD 2808 UMBRELLA TREE DR., EDGEWATER, FL 32141 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