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ECRETARY OF STAIR LAHASSEE, FLORIDA



COVER LETTER

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

SUBJECT: Studio 8	913, P.A. (PROPOSED CORPOR.	ATE NAME – <u>MUST INC</u> I	LUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	 ☑ \$78.75 Filing Fee & Certificate of Status 	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Mi	chelle S. Rosamond	e (Printed or typed)	
	6301 Memorial Highway, Suite	103 Address	
	Tampa, FL 33615	y, State & Zip	
	813-885-1200 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)

SECRETARY PION

ARTICLE I NAME

The name of the corporation shall be:

Studio 813, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 11508 Perfect Place

Tampa, FL 33626

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide cosmetology services to the general public

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): Michelle Lemmon President/CEO 11508 Perfect Place Tampa, FL 33626

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ARTICLE VI REGISTERED AGENT

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

Michelle Lemmon 11508 Perfect Place Tampa, FL 33626

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Michelle Lemmon 11508 Perfect Place Tampa, FL 33626

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

Michelle Lemma	8/26/08		
Date	Signature/Registered Agent	Michelle Lemma	8/26/08
Signature/Incorporator	Date		