

P090000033090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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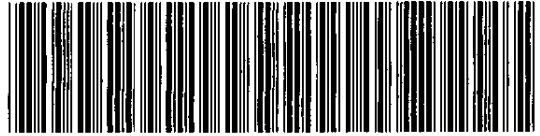
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/10/09--01025--001 **87.50

FILED

09

APR 10 AM 7:53

2009 APR 10 11:20 AM
CLERK OF DISTRICT COURT
JANUARY 1, 2009

Handwritten signature

COVER LETTER

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

SUBJECT: ABSOLUTE YAR 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 ☒ \$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: ROSA VEGA

Name (Printed or typed)

7841 NW 170 ST

Address

MIAMI, FL 33015

City, State & Zip

305-934-7912

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:

ABSOLUTE YAR SPA, INC.

ARTICLE II PRINCIPAL OFFICE

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

17685 NW 78 AVE
MIAMI, FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COSMETOLOGY

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):

ROSA VEGA
7841 NW 170 ST
MIAMI, FL 33015

ARTICLE VI REGISTERED AGENT

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

ROSA VEGA
7841 NW 170 ST
MIAMI, FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROSA VEGA
7841 NW 170 ST
MIAMI, FL 33015

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

4-02-09

Date

4-02-09

Date

FILED
09 APR 10 AM 7:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA