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## **COVER LETTER**

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

SUBJECT:	11 10 600 -0	ave Salon,	Inc.	
	(PROPOSED CORPORA)	ΓΕ NAME – <u>MUST INQL</u>	<u>UDE SUFFIX</u> )	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
\$70.00	\$78.75	☐ <b>\$</b> 78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
J	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		ADDITIONAL CO	Status DPY REQUIRED	
FROM:	May Mame	Printed or typed)		
	509 S	Cwart St.		
	Engle wood	State & Zip 34	773	
	(941) 81	5-6770		

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

# ARTICLES OF INCORPORATION OF

#### A New Wave Salon, Inc.

### A Florida Profit Corporation

(Pursuant to Chapter 607 of the Florida Statutes)

The undersigned person has signed this document for the purpose of forming a corporation under the laws of Florida and adopts the following Articles of Incorporation.

1. NAME: The name of this corporation is A New Wave Salon, Inc..

**PURPOSE AND POWERS:** This Corporation is organized for the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

This corporation shall have the broad general powers set forth in Chapter 607, Florida Statutes, and the purpose for which this corporation is organized is:

Hair Salon

- 2. AUTHORIZED SHARES: The Corporation shall have the authority to issue 1000 shares of common stock. The par value of the stock is \$1.
- 3. PRINCIPAL OFFICE AND MAILING ADDRESS OF CORPORATION: The principal place of business and mailing address of the corporation shall be:

Principal Place of Business 509 Stewart St. Englewood, FL 34223

Mailing Address 509 Stewart St. Englewood, FL 34223

4. INITIAL OFFICERS/DIRECTORS: The initial Board of Directors shall consist of One persons, who shall serve until the first annual meeting of the shareholders, and whose names and addresses are:

Mary Matthews 509 Stewart St., Englewood, FL 34223 President

Mary Matthews 509 Stewart St., Englewood, FL 34223 Secretary

<b>5.</b>	REGISTERED AGENT: The name and Florida street address of the Registered Agent of
	the Corporation is:

Mary Matthews 509 Stewart St. Englewood, FL 34223

**6. INCORPORATOR:** The name and address of the incorporator is:

Mary Matthews 509 Stewart St Englewood, FL 34223

7. **EFFECTIVE DATE:** These Articles are to be effective the date of filing unless otherwise specified below:

IN WITNESS WHEREOF, the following incorporator has signed these Articles of Incorporation on:

Date:

Mary Matthews

#### ACCEPTANCE BY REGISTERED AGENT

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.

Date: 4/20

Mary Matthew

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