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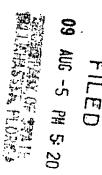
(Requestor's Name)				
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PICK-UP WAIT MAIL				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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# **COVER LETTER**

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

SUBJECT:	<b>ELEVATION SALON AND SPA INC</b>			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:	
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status	
		ADDITIONAL CO	DPY REQUIRED	
FROM:	Name (Printed or typed)			
	5311 49TH STREET NORTH			
	Address			
	SAINT PETERSBURG, FLORIDA 33709			
	City, State & Zip			
	727-544-1928			
_	Daytime	Telephone number		
	E-mail address: (to be use	ed for future annual report	notification)	

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)

### NAME ARTICLE I

The name of the corporation shall be:

# **ELEVATION SALON AND SPA INC**

### ARTICLE II PRINCIPAL OFFICE

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

THE ADDRESS OF THE PRINCIPAL OFFICE OF THE CORPORATION WILL BE: 5311 49TH STREET NORTH ST. PETERSBURG, FLORIDA 33709

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

THE CORPORATION MAY ENGAGE OR TRANSACT IN ANY OR ALL LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAW OF TH UNITED STATES OF AMERICA AND THE STATE OF FLORIDA.

### ARTICLE IV **SHARES**

The number of shares of stock is:

2,000 SHARES OF COMMON STKS. @ .50 PAR VALUE.

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

WANDA I. NIEVES

5311 49TH STREET NORTH ST. PETERSBURG, FLORIDA 33709

### REGISTERED AGENT ARTICLE VI

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

WANDA I. NIEVES

5311 49TH STREET NORTH ST. PETERSBURG, FLORIDA 33709

### ARTICLE VII INCORPORATOR

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

WANDA I. NIEVES

5311 49TH STREET NORTH ST. PETERSBURG, FLORIDA 33709

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, Tant familiar with and accept the appointment as registered agent and agree to act in this capacity

ignature/Registered Agent

Signature/Incorporator