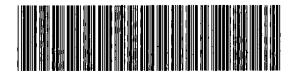
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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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(Document Number)					
Certified Copies Certificates of Status:					
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COVER LETTER

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

SUBJECT: Deseray's Hair Salon, Inc.

SUBJECT:	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	a check for:
□ \$76.00 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 PPY REQUIRED
FROM: De	siree Sturgeon	e (Printed or typed)	
50	5 W. Hickpoochee Ave., #158	Address	
<u>Lat</u>	pelle, Fl 33935	, State & Zip	
863		Telephone number	
des	v ireesturgeon1@hotmail.com		
	E-mail address: (to be use	ed for future annual report	notification)

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

•	LES OF INCORPORAT iance with Chapter 607 and/or 0)	
ARTICL The name	E of the corporation shall be:	Deseray's	Hair Salo	n.Inc.
ARTICL The princ			oochee Av	e Ays
ARTICL The purp	SE III PURPOSE ose for which the corporation is	abelle, Ke s organized is: Ha	33935 ir Salon	
ARTICL The numb		00		
ARTICL List name	E V INITIAL OFFICER e(s), address(es) and specific tit	RS AND/OR DIRECTO	ors Sturgeon	. c ih ad
		SOS W.	Sturgeon Hickpoochee, PL 33935	AVE#158
ARTICL The name	EVI REGISTERED A and Florida street address (P.	I <i>GENT</i> LO Pay NOT aggestable) of the registered egent i	G!
<u>ARTICL</u>	`	Desiree SDS W. I Labelle,	Sturgeon Hickpoochee, PC 33935	Ave#158
****		SOS W. Labelle,	Sturgeon Hickpoochee A PL 33935	
place desi	een named as registered agent ignated in this certificate, Lan act in this capacity		ocess for the above state	-
	Signature/Registered Age	shit)	.	10 ate
	Signature/Incorporator	Me -		<u>ate</u>