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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3-22-10

CR

## COVER LETTER

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

**SUBJECT:** D'VINE HAIR BOUTIQUE 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:** DAISY O. CHAVEZ

Name (Printed or typed)

10118 BRIARWICK CT

Address

TAMPA, FL 33615

City, State & Zip

813 892 3668

Daytime Telephone number

chavezodalis@yahoo.es

E-mail address: (to be used 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)

## **ARTICLE I      NAME**

The name of the corporation shall be:

D'VINE HAIR BOUTIQUE INC

## **ARTICLE II      PRINCIPAL OFFICE**

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

4311 N. ARMENIA AVE , TAMPA FL 33607

## **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

HAIR STYLIST, MANICURE, PEDICURE, FACIAL,WAX

## **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):

DAISY O.CHAVEZ  
10118 BRIARWICK CT,  
TAMPA FL 33615  
OWNER, HAIR STYLIST

## **ARTICLE VI      REGISTERED AGENT**

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

DAISY O.CHAVEZ  
10118 BRIARWICK CT, TAMPA FL 33615

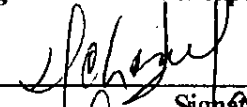
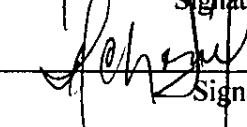
## **ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:

DAISY O. CHAVEZ  
10118 BRIARWICK CT, TAMPA FL 33615

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*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

03/16/2010  
\_\_\_\_\_  
Date

03/16/2010  
\_\_\_\_\_  
Date

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