

P10000086530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

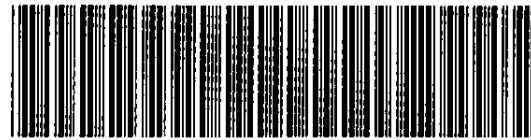
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900185465409

10/04/10--01024--026 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 OCT 21 AM 10:22

FILED

J. Shivers OCT 22 2010

210-46953

64

COVER LETTER

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

SUBJECT: Marlene's Beauty Salon, Corp
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input checked="" type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED			

FROM: Marlene Rodriguez *Marlene Rodriguez*
Name (Printed or typed)

14526 NW 88th CT
Address

Miami Lakes, FL 33018
City, State & Zip

305-302-9020
Daytime Telephone number

Marlene1971@bellsouth.net
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL 32307
2010 OCT 21 AM 10:22
FILED

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 Marlene's Beauty Salon, Corp
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
14526 NW 88th CT
Miami Lakes, FL 33018

Mailing address, if different is:
14526 NW 88th CT
Miami Lakes, FL 33018

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To service our customers with Hair and nail services.

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marlene Rodriguez-President
Address: 14526 NW 88th CT
Miami Lakes, FL 33018

Name and Title: Marlene Rodriguez-Treasurer
Address: 14526 NW 88th CT
Miami Lakes, FL 33018

Name and Title: Marlene Rodriguez-Secretary
Address: 14526 NW 88th CT
Miami Lakes, FL 33018

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Marlene Rodriguez
Address: 14526 NW 88th CT
Miami Lakes, FL 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Marlene Rodriguez
Address: 14526 NW 88th CT
Miami Lakes, FL 33018

SECRETARY OF STATE
FILED IN ASSISSE/FL/DIA/DIA
2010 OCT 21 AM 10:22
51157

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

Marlene Rodriguez
Required Signature/Registered Agent

09/29/2010
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Marlene Rodriguez
Required Signature/Incorporator

09/29/2010
Date