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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

10/22/10--01019--003 **78.75

Special Instructions to Filing Officer:

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TALLAHASSEE, FLORIDA

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Amount: \$78.75
Account: 5506596550
Bank Number: 06310027

Sequence Number: 6550682238
Capture Date: 10/25/2010
Check Number: 7322

| | | | |
|---|--|---|----------|
| | Age of Aquarius, Inc. 415 E. Shenden Street, Dania Beach, FL 33004 954-922-2847 | BANK OF AMERICA, NA 63-27/631 | 7322 |
| | | 10/21/2010 | |
| PAY TO THE ORDER OF | | FLORIDA DEPARTMENT OF STATE | \$ 78.75 |
| | | Seventy-Eight and 75/100 | DOLLARS |
| FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS | | | |
| | | ⑆007322⑆ ⑆06310027⑆ 005506596550⑆ ⑆000007875⑆ | |

BANK OF AMERICA, NA
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005-4500453-1009068736
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10/22/10

Attn: Meredith
954-792-8985

COVER LETTER

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

SUBJECT: AGE OF AQUARIUS, 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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: AGE OF AQUARIUS, INC
Name (Printed or typed)
415 E. SHERIDAN STREET
Address
DANIA, FL 33004
City, State & Zip
954-922-2847
Daytime Telephone number
Laura-Paz1980@LIFE.COM
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: AGE OF AQUARIUS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
415 E. SHERIDAN STREET
DANIA, FL 33004

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FULL SERVICE BEAUTY SALON

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LAURA BURGOS, PRESIDENT
Address: 415 E. SHERIDAN STREET
DANIA, FL 33004

Name and Title: _____
Address: _____

Name and Title: ERICK RIBAS, V.P.
Address: 415 E. SHERIDAN STREET
DANIA, FL 33004

Name and Title: _____
Address: _____

Name and Title: LAURA BURGOS, SEC.
Address: 415 E. SHERIDAN STREET
DANIA, FL 33004

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: LAURA BURGOS
Address: 415 E. SHERIDAN STREET
DANIA, FL 33004

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PATRICIA FUCILE
Address: 306 SE 6 STREET
DANIA, FL 33004

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]
Required Signature/Registered Agent

11/21/10
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.

[Signature]
Required Signature/Incorporator

11/21/10
Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA