P11000038034

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Coomsoo Chaif, Name)			
(Document Number)			
(Bootine Humber)			
Contilied Couries Contilies of Chabus			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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04/11/11--01023--005 **78.75

W1 20587

COVER LETTER

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

SUBJECT: Blue Diamonds Hair Et	uphoria Inc.	
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	icles of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL C	OPY REQUIRED
	.•	
FROM: Juan V. Lopez	e (Printed or typed)	
1891 SW 81 Ave Apt. 30)2	
	Address	
N. Lauderdale, FL 3306	58 State & Zip	
754-368-0597 Daytime T	elephone number	
bluediamondshaireupho E-mail address: (to be use	ria@gmail.com d for future annual report	notification)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 12, 2011

JUAN V LOPEZ 1891 SW 81 AVE APT 302 N LAUDERDALE, FL 33068

SUBJECT: BLUE DIAMONDS HAIR EUPHORIA

Ref. Number: W11000020587

We have received your document for BLUE DIAMONDS HAIR EUPHORIA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 811A00008866

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II			
	Principal street address	Mailing	address, if different is:
	891 SW 81 Ave Apt. 302		
7	L Lauderdale, FL 33068		
-		 	
ARTICLE III	PURPOSE		三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三
	hich the corporation is organized is:		≥隔 ≥
Internet Sales			APR APR
			335 19
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			D S ≥
ARTICLE IV	CHADEC		空 号。
	es of stock is:100		DA S
ne number of snar	es of stock is. Foo		
	INITIAL OFFICERS AND/OR DIRECTO		
	tle:Juan V, Lopez - President		
Address:	1891 SW 81 Ave Apt. 302		
	N. Lauderdale, FL 33068		
Name and Ti	tle:Mayra Aguilar - Vice President	Name and Title	
Address:	50 SW 45 Ave	Address:	
Address.	Coral Gables, FL 33134	Address.	
	COIAI CADIES, 1 L 00 104		
Name and Ti	tle:	Name and Title:	
Address:		Address:	
			
PTICIE VI	REGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Mayra Aguilar		
Address:	50 SW 45 Ave		
	Coral Gables, FL 33134		
	,		
	INCORPORATOR		
	ress of the Incorporator is:		
Name: Address:	Juan V Lopez		
Address:	1891 SW 81 Ave Apt. 302		
	N. Lauderdale, FL 33068		
'aving been name	d as registered agent to accept service of proc	ess for the above stated corp	poration at the place designated i
is certificate, I an	ı familiar with and accept the appointment as t	egistered agent and agree to	act in this capacity
$\mathcal{M}_{\mathbf{x}}$			
0 1/34	MG (Lalulas)		04/05/2011
1	Required Signature/Registered Agent		Date
V			
	ment and affirm that the facts stated herein a		
cument to the De	partment of State constitutes a third degree fel	ony as provided for in s.817.1	'55, F.S.
<i>N</i>			
1/	1 / 21		04/05/2011
	Regulfed Signature/Incorporator	 	Date