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2011 MAY -9 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAY 10 2011

COVER LETTER

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

SUBJECT: PROFILESNAILSUPPLYINC

(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: **DAN NGUYEN**

Name (Printed or typed)

1746 SW BILTMORE STREET

Address

PORT SAINT LUCIE, FL 34984

City, State & Zip

7722375586

Daytime Telephone number

DAN@PROFILESNAILSUPPLY.COM

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

PROFILESNAILSUPPLYINC

ARTICLE II PRINCIPAL OFFICE

Principal street address

1746 SW BILTMORE ST

PORT SAINT LUCIE, FL 34984

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**TO BE ABLE TO LOWER PERSONAL TAXATION AND
MAKING IT POSSIBLE TO EXTEND STOCK SHARING.**

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **DAN NGUYEN**

Address: **18161 SW 25TH ST
MIRAMAR FL 33029**

Name and Title: _____

Address: _____

Name and Title: **TRANG LE**

Address: **2279 SW NEWPORT ISLE BLVD
PORT SAINT LUCIE FL 34953**

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: **DAN NGUYEN**

Address: **18161 SW 25TH ST
MIRAMAR, FL 33029**


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **DAN NGUYEN**

Address: **18161 SW 25TH ST
MIRAMAR, FL 33029**

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


Required Signature/Registered Agent

5/4/11

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.


Required Signature/Incorporator

5/4/11

Date

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TALLAHASSEE, FLORIDA