

P11000050926

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

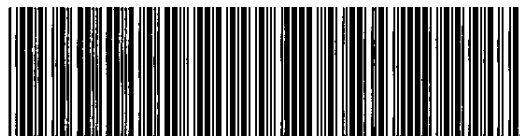
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T Burch MAY 31 2011

COVER LETTER

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

SUBJECT: Hair Extensions By Vicki, 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: Vicki Augsburg
Name (Printed or typed)

17525 Lebanon Road
Address

Fort Myers, FL 33967
City, State & Zip

239-470-2139
Daytime Telephone number

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

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

ARTICLE I - NAME

The name of the corporation shall be:

HAIR EXTENSIONS BY VICKI, INC.

ARTICLE II - PRINCIPAL OFFICE

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

*17525 LEBANON ROAD
FORT MYERS, FL 33967*

ARTICLE III - PURPOSE

The purpose for which the corporation is organized is:

*"Any and all lawful business"
HAIR EXTENSIONS*

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 titles(s)

*VICKI AUGSBURGER - PRESIDENT
17525 LEBANON ROAD
FORT MYERS, FL 33967*

ARTICLE VII - REGISTERED AGENT

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

*VICKI AUGSBURGER
17525 LEBANON ROAD
FORT MYERS, FL 33967*

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TALLAHASSEE, FLORIDA

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ARTICLE VIII - INCORPORATOR

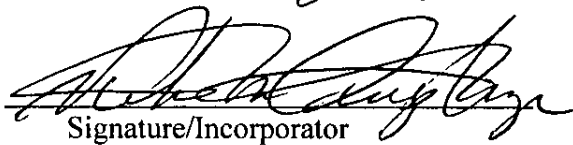
The name and address of the Incorporator is:

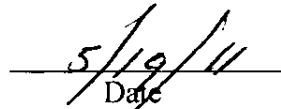
VICKI AUGSBURGER
17525 LEBANON ROAD
FORT MYERS, FL 33967

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


Date


Signature/Incorporator


Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 27 PM 4: 51

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