P11000055127

(Re	questor's Name)				
(Ad	dress)				
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(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
will-	29506				

Office Use Only



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05/26/11--01016--016 **78.75



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COVER LETTER

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

SUBJECT:	GILDESTOC. TE 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 & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED					
FROM: BERUTY BUILDERS, Inc. Name (Printed or typed)						
800 A NE 45th ST						
FOOT LAND ERED 21 & FL. 33062 City, State & Zip						
954 673.5667 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.

···, ·



May 27, 2011

PATRICIA RESTREPO 1340 S. OCEAN BLVD #2109 POMPANO BCH, FL 33062

SUBJECT: BEAUTY BUILDERS, INC

Ref. Number: W11000029506

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

Please list the corporation name in Article I.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 811A00013211

www.sunbiz.org

DO DOY COOK THE DESCRIPTION OF THE STATE OF

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

The name of the corp	VAME oration shall be: BESC	ty Bu	ilders	s, Ine	
ARTICLE II F	PRINCIPAL OFFICE Principal street address OFFICE OFFICE 33334	<u></u>	Mailing a	address, if different is: OCEN BLUE BCH, F	1#2109 L3306
	URPOSE ch the corporation is organized is:	tourisi \$ 710	M FA. N SEZ	eilitate vices	DY5
ARTICLE IV S The number of shares	HARES of stock is:				
	13 FO S. OCEAN L	Name Add	ne and Title: ress:		
Name and Title Address:	TEDUZIDO MESO 1618 DE 33 STOCE Octional Peils Fl		ress:	JALLA	
Name and Title Address:		Nam Add	e and Title:	HASSEE TL	TO PARTIES
	EGISTERED AGENT la street address (P.O. Box NOT a LATRICIA KE 1340 SO S	SLEE 63		2109 2109	<u></u>
	SE OF THE INCOMPORATOR SE OF THE INCOMPORATOR IS: PATRICIA RESIDENCE 1810 S. DCSAN PONYPRO BO	EEPO BLV0#21 JH, FL 33	<i>0</i> 9 062		
this certificate, I am f	as registered agent to accept servion Camiliar with and accept the appoin	ce of process for th tment as registered	e above stated corpo agent and agree to a	oration at the place d act in this capacity	esignated in
Pateice	Required Signature/Registered	l Agent		<u>05 - 2</u> Date	24.11
I submit this docume document to the Depa	ent and affirm that the facts stated artment of State constitutes a third of	l herein are true, I	am aware that the	false information subsets, F.S.	bmitted in a
Potricia	Required Signature/Incorpor	orator		05. 20 Date	<u>f·1</u>]