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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

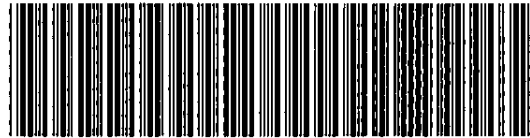
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

*Kent Johnson*  
AUTHORIZATION BY PHONE TO **GAME**  
CORRECT *Article 7*  
DATE *9/19/11*  
DOC. EXAM *MRD*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*MRD*  
*9/19*

## COVER LETTER

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

SUBJECT: Faces South Florida ~~Enterprise~~ Corp.

(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: Kent Johnson

Name (Printed or typed)

3433 Hollywood Oaks Drive

Address

Ft. Lauderdale, FL 33312-6388

City, State & Zip

954-707-2836

Daytime Telephone number

kentbjohnson@bellsouth.net

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** Faces South Florida Corp.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
3433 Hollywood Oaks Drive  
Ft Lauderdale, Florida 33312-6388

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Opening a new Spa for Facials and Waxing

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Barbara Johnson, President  
Address: 3433 Hollywood Oaks Drive  
Ft Lauderdale, FL 33312-6388

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Kent Johnson, Vice President  
Address: 3433 Hollywood Oaks Drive  
Ft Lauderdale, FL 33312-6388

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: Kent Johnson, Vice President  
Address: 3433 Hollywood Oaks Drive  
Ft Lauderdale, FL 33312-6388

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Kent Johnson, Vice President  
Address: 3433 Hollywood Oaks Drive  
Ft Lauderdale, FL 33312-6388

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

Kent Johnson  
Required Signature/Registered Agent

9/14/11  
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.

Kent Johnson  
Required Signature/Incorporator

9/14/11  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA