

P11000086486

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Office Use Only



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09/02/11--01032--003 \*\*70.00

W11-45976

RECEIVED OCT 3 2011

**COVER LETTER**

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

SUBJECT: DIVINE Nail 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: Quan Nguyen  
Name (Printed or typed)  
1564 NE 191 St Apt 215  
Address  
North Miami Beach, FL 33179  
City, State & Zip  
786-266-2608  
Daytime Telephone number  
quan.t.nguyen@yahoo.com  
E-mail address: (to be used for future annual report notification)

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



RECEIVED

11 SEP 19 PM 3:17

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 6, 2011

QUAN NGUYEN  
1564 NE 191 ST APT 215  
NORTH MIAMI BEACH, FL 33179

SUBJECT: DIVINE NAIL CORP.  
Ref. Number: W11000045976

QND  
We have received your document for DIVINE NAIL CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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: 211A00020636



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

SEP 30 AM 11:22  
DIVISION OF CORPORATIONS

September 20, 2011

QUAN NGUYEN  
1564 NE 191 ST APT 215  
NORTH MIAMI BEACH, FL 33179

SUBJECT: DIVINE NAIL QND CORP.  
Ref. Number: W11000045976

We have received your document for DIVINE NAIL QND CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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: 711A00021736

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: **DIVINE NAIL CORP.**

QND

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**3341 Hollywood Blvd  
Hollywood FL, 33021**

Mailing address, if different is:

**1564 NE 191 St Apt 215  
North Miami Beach FL 33179**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**Quan Dao Corp.**

**DIVINE NAIL QND CORP**

**ARTICLE IV SHARES**

The number of shares of stock is:

**~~100~~ 1**

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

Name and Title: **Divine Nail**  
Address: **3341 Hollywood Blvd  
Hollywood FL, 33021**

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

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

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: **Quan Nguyen**  
Address: **1564 NE 191 St 215  
Miami FL 33179**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

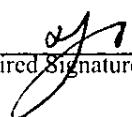
Name: **Doa Ngo**  
Address: **1564 NE 191 St 215  
Miami FL 33179**

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

**8/30/11**  
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

**8/30/11**  
Date