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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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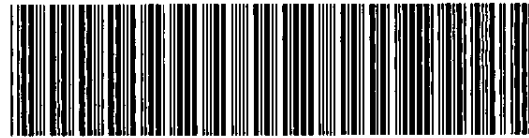
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/27/11--01008--012 **78.75

SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 OCT 27 AM 11:16

10/28/11

COVER LETTER

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

SUBJECT: Martha E Smith Nails of Winter Haven 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: Martha E Smith
Name (Printed or typed)

404 Garrett Ridge Ct
Address

Winter Haven FL 33880
City, State & Zip

Daytime Telephone number

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 OCT 27 AM 11:16

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

EFFECTIVE DATE

10/24/11

**ARTICLES OF INCORPORATION
OF**

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

2011 OCT 27 AM 11:16

Martha E Smith Nails of Winter Haven Inc.

THE UNDERSIGNED, being over the age of eighteen years, in order to form a corporation pursuant to the provisions of the Corporate Code, hereby certifies as follows:

**Article I
Identification**

The name of the corporation, hereinafter referred to as the "Corporation," is Martha E Smith Nails of Winter Haven Inc.

**Article II
Principal Office**

The principal place of business is 404 Garrett Ridge Ct., Winter Haven FL 33880. The mailing address of the principal office is 404 Garrett Ridge Ct., Winter Haven FL 33880.

**Article III
Purpose**

The purpose of the Corporation is to engage in any or all lawful business for which corporations may be organized under the provisions of the General Corporation Law of Florida.

**Article IV
Shares**

The total authorized capital stock of the Corporation is 100 shares having a Par Value of \$1.00. All or any part of said shares may be issued by the Corporation from time to time and for such consideration as may be determined upon or fixed by the Board of Directors, as provided by law.

**Article V
Initial Officers and/or Directors**

The name and post office address of the initial Officer(s) and initial Director(s) of the Corporation is as follows:

President:
Martha E Smith
404 Garrett Ridge Ct
Winter Haven FL 33880

Article VI
Registered Office and Registered Agent

2011 OCT 27 AM 11:16

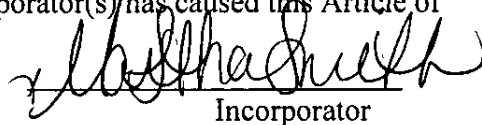
The address of the initial registered office of the Corporation is 404 Garrett Ridge Ct., Winter Haven FL 33880 and the name and address of the initial registered agent therein and in charge thereof, upon whom process against the Corporation may be served, is Martha E Smith, 404 Garrett Ridge Ct., Winter Haven FL 33880.

Article VII
Incorporator's Address

The name and post office address of the Incorporator(s) of the Corporation is Martha E Smith, 404 Garrett Ridge Ct, Winter Haven FL 33880.

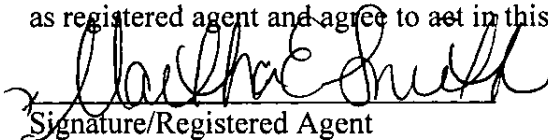
The effective date of this Article of Incorporation shall be 10 24, 2011.

IN WITNESS WHEREOF, the undersigned Incorporator(s) has caused this Article of Incorporation to be executed as of 10 24, 2011.


Incorporator

ACCEPTANCE BY REGISTERED AGENT

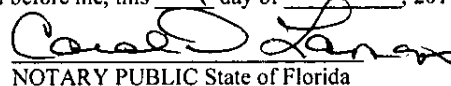
Having been named as registered agent to accept services of process for the above stated corporation at the place designated in this article, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.


Signature/Registered Agent

10/24/11
Date

STATE OF FLORIDA)
COUNTY OF POLK)

The forgoing Articles of Incorporation were acknowledged before me, this 24 day of Oct, 2011.


NOTARY PUBLIC State of Florida

Commission Expires:

