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SECRETARY OF STATE

11 DFC 27 PH 9:

COVER LETTER

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

SUBJECT: Hanna to Henna, Inc		
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u> I	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL CO	OPY REQUIRED
FROM: Ana Lauren Garcia	(Printed or typed)	
4500 SW 135 Ave	M4	· · · · · · · · · · · · · · · · · · ·
Miami, FI 33175	Address	
City,	State & Zip	
786-226-6455 Daytime Te	elephone number	
hannatohenna@gmail.co E-mail address: (to be used	•	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 Hanna to Henna, inc		11 DEC 27 PH 9: 09
The name of the co	riporation snail be:		TIDES ET THE J. U.S.
ARTICLE II	PRINCIPAL OFFICE		SECRETARY OF STATE
	Principal street address	Mailing addre	STATUTATION OF FLORIDA
	1500 SW 135 Ave	16275 SW 88 St #	108
1	Miami, Fl 33175	Miami, FI 33196	
·			
ARTICLE III			
	hich the corporation is organized is:		
	the business of retail store, internet		
	tion house, or selling goods on aucti		
	g and processing relating to any pro	iduct and any or other lav	vful business purposes
for which cor	porations may be formed.		
ARTICLE IV			
The number of shar	res of stock is: 100		
	INITIAL OFFICERS AND/OR DIRECTO		
	itle:Ana Lauren Garcia-President	Name and Title:	
Address:	4500 SW 135 Ave	Address:	
	Miami, FL 33175		
			· · · · · · · · · · · · · · · · · · ·
	tle:		
Address:		Address:	
Name and Ti	itle:	Name and Title:	
Address:			
		<u></u>	
	REGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable)		
Name:	Ana Lauren Garcia		
Address:	4500 SW 135 Ave		
	Miami, Fl. 33175	·····	
ARTICLE VII	INCORPORATOR		
The <u>name and add</u>	ress of the Incorporator is:		
Name:	Ana Lauren Garcia		
Address:	16275 SW 88 ST # 108	 ,	
	Miami, FL 33196		
	ed as registered agent to accept service of proce in familiar with and accept the appointment as re		
	acun		12-19-2011
<u> </u>	Required Signature/Registered Agent		Date
	ment and affirm that the facts stated herein a	re true. I am aware that the falso	e information submitted in a
locument to the De	epartment of State constitutes a third degree felo	ny as provided for in s.817.155, F	.S.

Required Signature/Incorporator