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(Re	equestor's Name)	
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PICK-UP		MAIL
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ertified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



05/14/12--01034--009 **78.75



COVER LETTER

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee

ee Filing Fee & Certificate of Status

\$78.75	\$87.50
Filing Fee	\$87.50 Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL C	OPY REQUIRED

NGMEN Name (Printed or typed) iQ))M £ FROM: 81 21 51 Address BEACH +1 City, State & Zip VERO 2 - 794 -Daytime Telephone num E-mail address: (to be used for future annual report notification)

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

1.



RECEIVED

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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 15, 2012

QUYEN NGUYEN 772 21ST STREET VERO BEACH, FL 32960

SUBJECT: TIP TOP SALON INC. Ref. Number: W12000026856

We have received your document for TIP TOP SALON 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):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

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) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 112A00014359

www.sunbiz.org

Division of Componentiana DO DOV 6997 Tallahagaaa Florida 99914

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: TIP TOP SA	LON INC.
ARTICLE II PRINCIPAL OFFICE	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	FILED 2 MAY 25 PH 3: ECREINRY OF ST LLAINSSEE FIT
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOD Name and Title: QUYEN NEUYEN - Prov Address: ISI NW SWANN MILL CUR FORT SI. LUCIE, FL, 344	Address:
Name and Title: Address:	
Name and Title:Address:	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) o Name: <u>IQUEN NIFUEN</u> Address: <u>AL2</u> <u>2</u> [S] CDF EF 1	f the registered agent is: 6 D.
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: Name: (21) YEN NEVYER)	
Address: 772 - QUST STREET,	- 9,0
Having been named as registered agent to accept service of proces	
this certificate, I am familiar with and accept the appointment as reg	istered agent and agree to act in this capacity
Hequiret Signature/Registered Agent	<u> </u>
I submit this document and affirm that the facts stated herein are	e 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. equired Signature/Incorporator