

P12000054864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

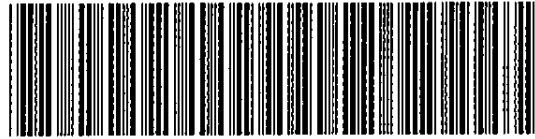
(Document Number)

Certified Copies ☒

Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



300236212503

06/13/12--01006--006 **78.75

RECEIVED
DEPARTMENT OF STATE
12 JUN 19 AM 9:23

FILED
12 JUN 19 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ps 6/19/12

COVER LETTER

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

SUBJECT: Naturally "U" Art and Braid School, 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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Selena Alexander

Name (Printed or typed)

1141-A Apalachee Parkway

Address

Tallahassee, FL 32301

City, State & Zip

850.386.8523

Daytime Telephone number

smjerome@yahoo.com

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

The name of the corporation shall be: Naturally "U" Art and Braid School, Inc.

EIN: 03-0398036

ARTICLE II PRINCIPAL OFFICE

Principal street address
1141-A Apalachee Parkway
Tallahassee, FL 32301

Mailing address, if different is:
1141-A Apalachee Parkway
Tallahassee, FL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all Lawfull Business permitted under the laws of the United States and Florida.

ARTICLE IV SHARES

The number of shares of stock is 1,000 Shares at \$1.00 per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Selena Alexander, CEO
Address: 1141-A Apalachee Parkway
Tallahassee, FL 32301

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: Selena Alexander
Address: 1141-A Apalachee Parkway
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Selena Alexander
Address: 1141-A Apalachee Parkway
Tallahassee, FL 32301

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

Selena Alexander
Required Signature/Registered Agent

06-18-2012
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.

Selena Alexander
Required Signature/Incorporator

06-18-2012
Date

FILED
12 JUN 19 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA