

PI2000096320

(Requestor's Name)

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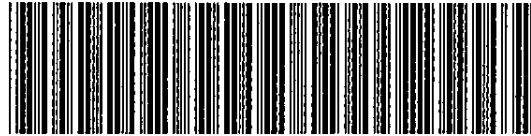
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/02/12--01034--010 **78.75

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12 NOV 19 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
W12-38466

TRANSMITTAL LETTER

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

SUBJECT: URBAN CUTZ & FADEZ, INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Tyron D. Hanna
Name (Printed or Typed)

5040 Elmhurst Rd. Apt. D
Address

WEST PALM BEACH, FL 33417
City, State & Zip

561-305-8907
Daytime - Telephone Number



RECEIVED

12 NOV 19 PM 1:25

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 3, 2012

TYRON D. HANNA
5040 ELMHURST RD APT D
WEST PALM BEACH, FL 33417

SUBJECT: URBAN CUTZ & FADEZ, INC.
Ref. Number: W12000035466

We have received your document for URBAN CUTZ & FADEZ, 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):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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: 812A00017996

**ARTICLES OF INCORPORATION
OF
URBAN CUTZ & FADEZ, INC**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as an incorporator of, **URBAN CUTZ & FADEZ, INC** in compliance with Chapter 607 and/or Chapter 621, F.S (Profit), adopts the following Articles of Incorporation.

**ARTICLES I
NAME**

The name and address of this principle corporation is **URBAN CUTZ & FADEZ, INC.** 5040 Elmhurst Rd. Apt. D, West Palm Beach, FL 33417 in Palm Beach County. The corporation is organized pursuant to the FLORIDA profit Corporation Code.

**ARTICLE II
COMMENCEMENT OF EXISTENCE**

The duration of this corporation shall be perpetual. The existence of the corporation will commence on the date of filing of these Articles of Incorporation.

**ARTICLE III
PURPOSE**

To establish an operate a complete full service salon and Barber Shop under the name of **URBAN CUTZ & FADEZ, INC** However, this corporation may engage in any activity or business permitted under the law of United States and Florida.

**ARTICLE IV
AUTHORIZED SHARES**

The maximum number of shares that the corporation is authorized to have outstanding at any time is 100 shares of common stock having a par value or \$1.00 per share. The consideration to be paid for each share shall be fixed by the Board of Directors and may be in whole or part in cash or other property, tangible or intangible, or in labor or services actually performed for the Corporation, with a value, in the judgment of the directors, equivalent to or greater than the full par value or the shares.

**ARTICLES V
REGISTERED OFFICE AND AGENT**

The address of the Registered Office: 5040 Elmhurst Rd. Apt. D, West Palm Beach, FL and the name and address of the registered agent of the corporation shall be:

Tyron D. Hanna
5040 Elmhurst Rd. Apt. D
West Palm Beach, FL 33417

**ARTICLE VI
BOARD OF DIRECTORS**

The corporation shall have (1) one director. The name and address of the person(s) appointed to act as the initial Director of this corporation, who shall be the sole proprietor:

NAME

ADDRESS

Tyron D. Hanna
President/CEO

5040 Elmhurst Rd. Apt. D
West Palm Beach, FL 33417

**ARTICLE VII
AMENDMENT**

To the fullest extent permitted by the State Of Florida Business Corporation Act as it exists or may hereafter be amended, no person who is serving or who has served as a director of the corporation shall be personally liable to the corporation or any of its shareholders for monetary damages for breach of duty as a director. No amendments or repeal of this Article nor the adoption of any provision of these Articles of Incorporation inconsistent with this Article shall eliminate or reduce the protection granted herein with respect to any matter that occurred prior to such amendment, repeal, or adoption.

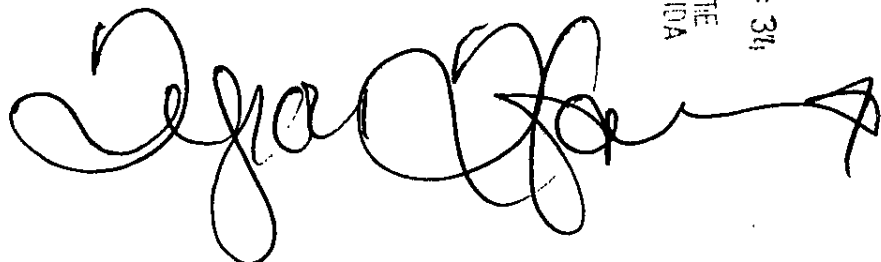
**ARTICLE VIII
VOTING**

The corporation elects to have pre-emptive rights. All shareholders of the corporation are entitled to accumulate their votes for directors. No amendments shall be made to this Article when the number of shares voting against the proposal to amend would be sufficient to elect a director by cumulative voting and such shares are entitled to be voted cumulatively for the election of directors.

ARTICLE IX

Executed on June 26, 2012, the name and address of the incorporator of this corporation shall be:

Tyron D. Hanna
5040 Elmhurst Rd. Apt. D
West Palm Beach, FL 33417



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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT / REGISTER OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES. THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS:

URBAN CUTZ & FADEZ, INC

(Must include suffix)

2. The name and address of the registered agent and office is:

Tyron D. Hanna

(Name)

**5040 Elmhurst Rd.
Apt. D**

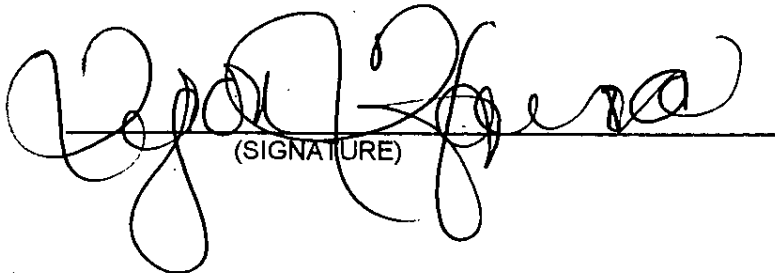
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West Palm Beach, Florida 33417

(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)


(DATE)