

P 130000 13754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

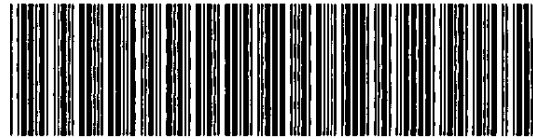
(Document Number)

Certified Copies Certificates of Status

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Office Use Only

W91-
W13 000005436



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01/25/13--01018--017 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB -8 PM 1:06

2/11/13

COVER LETTER

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

SUBJECT: Angel Touch NAIL care INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Sovy Chum
Name (Printed or typed)

922 Santa Maria Blvd
Address

Saint Augustine, Florida 32086
City, State & Zip

904-429-7524
Daytime Telephone number

OukNick@yahoo.com
E-mail address: (to be used for future annual report notification)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB -8 PM 1:06

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2013 FEB -8 PM 4:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 28, 2013

SOVY CHUM
922 SANTA MARIA BLVD.
SAINT AUGUSTINE, FL 32086

SUBJECT: ANGEL TOUCH NAIL CARE INC
Ref. Number: W13000005436

We have received your document for ANGEL TOUCH NAIL CARE INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 813A00002081

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB -8 PM 1:06

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: Angel Touch NAILS CARE INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

938B Santa Maria Blvd
St. Augustine, Florida
32086

Mailing address, if different is:

922 Santa Maria Blvd
St. Augustine, Florida
32086

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any And All Purpose

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sovy Chum (owner)

Address: 922 Santa Maria Blvd
St. Augustine, Florida
32086

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

(conti.)

Name and Title:

Name and Title:

Address

Address:

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:

Sovy Chum

Address:

922 Santa Maria Blvd
St. Augustine Florida 32086

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Sovy Chum

Address:

922 Santa Maria Blvd
St. Augustine Florida 32086

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

Schum
Required Signature/Registered Agent

1-23-2013
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.

Schum
Required Signature/Incorporator

1-23-2013
Date

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