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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRB
2/27/13

COVER LETTER

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

SUBJECT: HALEY'S NAIL & SPA, 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

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: KIM OANH T LE
Name (Printed or typed)

12901 MCGREGOR BLVD, #4
Address

FORT MYERS, FL 33919
City, State & Zip

(239) 682-3180
Daytime Telephone number

Ricky.truongle2012@yahoo.com
E-mail address: (to be used for future annual report notification)

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

RECEIVED

13 FEB 25 AM 10:24

RECEIVED
11/14/2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 13, 2013

KIMOANH T LE
12901 MCGREGOR BLVD
#4
FORT MYERS, FL 33919

SUBJECT: HALEYS NAIL & SPA, INC.
Ref. Number: W13000008993

We have received your document for HALEYS NAIL & SPA, 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):

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.

Complete Article III listing the purpose of the corporation.

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.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 113A00003577

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

HALEY'S NAIL & SPA, INC.

13 FEB 25 PM 3:34

ARTICLE II PRINCIPAL OFFICE

Principal street address

12901 MCGREGOR BLVD
#4, FORT MYERS,
FL 33919.

Mailing address, if different from principal office

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

cosmetology salon / Day spa

ARTICLE IV SHARES

The number of shares of stock is:

1.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KIM OANH T LE - DIRECTOR Name and Title: _____

Address: 12901 MCGREGOR BLVD Address: _____

#4, FORT MYERS,
FL 33919.

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: KIM OANH T LE

Address: 12901 MCGREGOR BLVD

#4, FORT MYERS, FL 33919.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: KIM OANH T LE

Address: 12901 MCGREGOR BLVD,

#4, FORT MYERS, FL 33919

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

Kim Oanh T Le

Required Signature/Registered Agent

02/08/2013
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.

Kim Oanh T Le

Required Signature/Incorporator

02/08/2013
Date