

P13000031648

(Requestor's Name)

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(City/State/Zip/Phone #)

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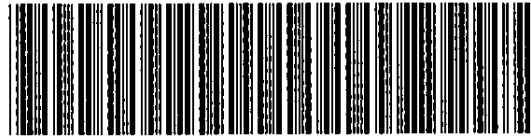
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: _____

Pam's Beauty Supply
(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: _____

Pamela Byrd

Name (Printed or typed)

2743 Dupont Rd Havana

Address

Havana FL 32333

City, State & Zip

850 (339) 8429

Daytime Telephone number

Pamela Byrd 25@gmail.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: Pam's Beauty Supply Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2743 Dupont Rd
Havana 71, 32333

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Small Business To Sell
beauty Supplies.

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ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pamela Byrd Name and Title: _____

Address: 2743 Dupont Rd Address: _____
Havana 71, 32333
880 339-8479 president

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(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: Pamela Byrd
Address: 2743 Dupont Rd
Hewana Fl, 32333

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Pamela Byrd
Address: 2743 Dupont Rd
Hewana Fl, 32333

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

Pamela Byrd 4-8-2013
Required Signature/Registered Agent 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.

Pamela Byrd 4-8-2013
Required Signature/Incorporator Date