

P13000033009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

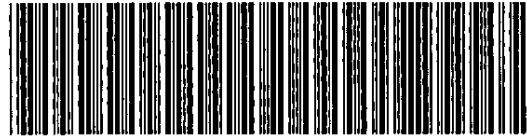
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/10/13--01009--012 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 APR 10 PM 12:28

PS 4/11/13

COVER LETTER

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

SUBJECT: LA FEMME BEAUTY SALON, 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: JACOBO & ASSOCIATES INC.

Name (Printed or typed)

6220 WEST 21 CT

Address

HIALEAH, FL 33016

City, State & Zip

305-556-0044

Daytime Telephone number

ljacobo621@aol.com

E-mail address: (to be used for future annual report notification)

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

**Florida Department of State
Division of Corporations**

April 5, 2013

Ref Number: New Application

Dear Sir/Madam:

I, Nilda Lara, president/owner of LA FEMME BEAUTY SALON Inc., with Document number P01000008392, hereby relinquish the company name to be used to incorporate a new company with the same name. The new company will be associated with the previous company by its owners.

Please contact me at (305) 556-0044 should you require further information or have any concerns.

Kind Regards,

Nilda Lara

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: LA FEMME BEAUTY SALON, INC

13 APR 10 PM 12:28

ARTICLE II PRINCIPAL OFFICE

Principal street address
10926 NW 7TH AVE
MIAMI, FL 33168

Mailing address, if different is:
10926 NW 7TH AVE
MIAMI, FL 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NILDA LARA, PRESIDENT
Address: 236 NW 101 ST
MIAMI, FL 33150

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:

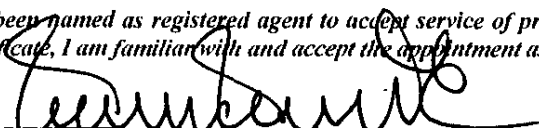
Name: JACOBO & ASSOCIATES INC
Address: 6220 W 21 CT
HIALEAH, FL 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

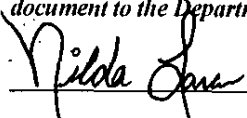
Name: NILDA LARA
Address: 236 NW 101 ST
MIAMI, FL 33150

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.


Required Signature/Registered Agent

04/05/13
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.


Required Signature/Incorporator

04/05/13
Date