

P13000069375

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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13 AUG 19 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W13-4309.8

T. Burch AUG 22 2013

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COVER LETTER

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

SUBJECT: Neighborhood Barbers and Hair Salon
(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: Deborah Evans
Name (Printed or typed)

920 - 9th Ter. S.
Address

St. Petersburg, FL 33705
City, State & Zip

727-824-2854
Daytime Telephone number

Deborahkevens@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

RECEIVED
13 AUG 19 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 1, 2013

DEBORAH EVANS
920 - 9TH TERR S
ST PETERSBURG, FL 33705

SUBJECT: NEIGHBORHOOD BARBER AND HAIR SALON
Ref. Number: W13000043098

We have received your document for NEIGHBORHOOD BARBER AND HAIR SALON 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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: 613A00018558

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: Neighborhood Barber and Hair Salon Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

6045 Dr. ML King St. S.
St. Petersburg, FL 33705

920-9th Ter, S.
St. Pete, FL 33705

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To service customers For hair cuts, shave, chemical
services, relaxers, perms, color, weave sew-in, shampoo
and hair styles

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Deborah Evans, President Name and Title: _____

Address: 6045 Dr. ML King St. S. Address: _____
St. Pete, FL 33705

Name and Title: Shawn Bivens, Vice President Name and Title: _____

Address: 5016 Snow Berry Dr. Address: _____
Fontana, CA 92336

Name and Title: Gregory Bivens, Manager Name and Title: _____

Address: 920-9th Ter, S. Address: _____
St. Pete, FL 33705

ARTICLE VI REGISTERED AGENT

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

Name: Deborah Evans

Address: 920-9th Ter, S.
St. Pete, FL 33705

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TALLAHASSEE, FL 32399

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Deborah Evans

Address: 920-9th Ter, S.
St. Pete, FL 33705

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

Deborah Evans
Required Signature/Registered Agent

8/14/13
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Deborah Evans
Required Signature/Incorporator

8/14/13
Date

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TALLAHASSEE, FLORIDA