

P140000037934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

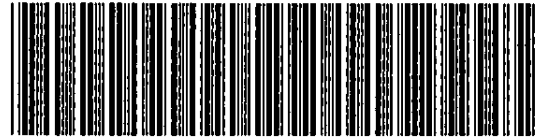
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only

B4/30/14



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04/28/14--01047--019 \*\*70.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE  
14 APR 28 PM 2:00

## COVER LETTER

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

**SUBJECT:** Hair Models Global, 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:** Kurt Lipton

Name (Printed or typed)

PO Box 742464

Address

Boynton Beach, FL 33474

City, State & Zip

561-395-5550

Daytime Telephone number

kurtlipton@yandex.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: Hair Models Global, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

6855 Cobia Circle  
Boynton Beach, FL 33437

Mailing address, if different is:

PO Box 742464  
Boynton Beach, FL 33474-2464

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Customer Service, sales, technical  
assistance, model management, and social media. Any and  
all activities permitted under the Laws of the State of Florida  
and the United States of America.

**ARTICLE IV SHARES**

The number of shares of stock is: 120

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Kurt Lipton, President

Name and Title: \_\_\_\_\_

Address PO Box 742464

Address: \_\_\_\_\_

Boynton Beach, FL 33474-2464

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE  
14 APR 28 PM 2:00

(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: Kurt Lipton 

Address: 6855 Cobia Circle

Boynton Beach, FL 33437

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Kurt Lipton

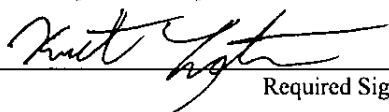
Address: 6855 Cobia Circle

Boynton Beach, FL 33437

14 APR 28 PM 2:00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*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*

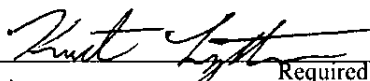


Required Signature/Registered Agent

4/22/2014

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

4/22/2014

Date

Kurt Lipton