

P14000041608

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2014 MAY -9 PM 2:01

1/H

## COVER LETTER

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

SUBJECT: TIPS AND CLIPS BY ARLENE 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: ARLENE YOUNG  
Name (Printed or typed)  
7212 SIENNA RIDGE LANE  
Address  
LAUDERHILL, FL 33319  
City, State & Zip  
954-303-0971  
Daytime Telephone number  
SPOTS2001@HOTMAIL.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: TIPS AND CLIPS BY ARLENE INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

8759 NW 16 STREET  
LAUDERHILL, FL 33319

Mailing address, if different is:

7441 NW 35 G  
LAUDERHILL, FL 33319

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO PROVIDE COSMETOLOGY SERVICES  
AND SALES TO THE PUBLIC

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: ARLENE YOUNG/ DIRECTOR

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

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

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

2814 MAY -9 PM 2:01

**ARTICLE VI REGISTERED AGENT**

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

Name: ARLENE YOUNG  
Address: 7441 NW 35 Ct  
Landerhill, FL 33319

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ARLENE YOUNG  
Address: 7441 NW 35 Ct  
Landerhill, FL 33319

*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

MAY 7TH, 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

May 7<sup>th</sup> 2014  
Date