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14 MAY 27 PM 2:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

W17-28455

COVER LETTER

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

SUBJECT: **NAIEXPRESS**

(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: **BOC V LE**

Name (Printed or typed)

10201 HAMMOCKS BLVD SUITE 124

Address

MIAMI, FLORIDA 33196

City, State & Zip

(305) 733-9008

Daytime Telephone number

RN1566@YAHOO.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

May 6, 2014

BOC V LE
10201 HAMMOCKS BLVD SUITE 124
MIAMI, FL 33196

SUBJECT: NAILS EXPRESS
Ref. Number: W14000028455

RECEIVED
14 MAY 23 PM 2:12
STATE
TALLAHASSEE, FLORIDA

We have received your document for NAILS EXPRESS 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 designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Please return 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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 714A00009599

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:

NAI\$ EXPRESS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10201 HAMMOCKS BLVD SUITE 124

MIAMI FL 33196

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NAIL SALON SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BOC V LE

Name and Title: _____

Address: 10201 HAMMOCKS BLVD STE 124

Address: _____

MIAMI FL 33196

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

14 MAY 27 PM 2:36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(cont.)

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: BOC V LE

Address: 10201 HAMMOCKS BLVD STE 124

MIAMI FL 33196

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BOC V LE

Address: 10201 HAMMOCKS BLVD STE 124

MIAMI FL 33196

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

X [Signature]
Required Signature/Registered Agent

5/1/2014
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.

X [Signature]
Required Signature/Incorporator

5/1/2014
Date

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14 MAY 27 PM 2:36
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TALLAHASSEE FLORIDA