

P14000053797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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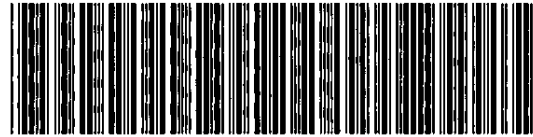
(Business Entity Name)

(Document Number)

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14 JUN 19 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W14- 31558

06/20/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 19, 2014

HONG V. LE
4222 S.W. 152ND AVE.
MIAMI, FL 33185

SUBJECT: C NAILS INC
Ref. Number: W14000031558

We have received your document for C NAILS INC 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 distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : C NAIL INC., document number P11000033107.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 114A00010795

COVER LETTER

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

SUBJECT: CNAILS 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: HONG V LE

Name (Printed or typed)

4222 SW 152 ND AVE

Address

MIAMI FL 33185

City, State & Zip

305-801-1914

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.

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: C NAILS ~~LLC~~ Spa INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4222 SW 152 ND AVE

MIAMI FL 33185

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: NAIL SALON SERVICE

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HONG V LE
Address: 4222 SW 152 ND
MIAMI FL 33185

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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: HONG V LE
Address: 4222 SW 152 ND
MIAMI FL 33185

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: HONG V LE
Address: 4222 SW 152 ND
MIAMI FL 33185

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TALLAHASSEE, FLORIDA

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

5/5/2014
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

5/5/2014
Date