

PK000003031

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000009234 3)))



H150000092343ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE,
Account Number : I20030000019
Phone : (305) 552-5973
Fax Number : (305) 675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
THE NEW ANGEL'S BEAUTY SALON, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

FILED
15 JAN 12 PM 5:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

RECEIVED
15 JAN 12 PM 4:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

H15000009234

ARTICLE I NAME: The name of the corporation is:

THE NEW ANGEL'S BEAUTY Salon, Inc.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

6601 SW 8 ST

Suite #5

Miami FL 33144

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

YERLANG Lopez Hernandez (P)

FILED
15 JAN 12 PM 5:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Yerlang Lopez Hernandez

6601 SW 8 ST Suite #5

Miami FL 33144

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Yerlang Lopez Hernandez

6601 SW 8 ST Suite #5

Miami FL 33144

H15000009234

11/23/2032 07:09

#6156 P.003/003

H15000009234

Required Signatures:

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

Yerlony Lopez _____
Registered Agent 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.

Yerlony Lopez _____
Incorporator Date

15 JAN 12 PM 5:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED