

A5000052472

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(Business Entity Name)

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2015 JUN 18 PM 1:55
CLERK OF SUPERIOR COURT
JANUARY 1, 1990

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SECTION OF CORPORATIONS

u/22

COVER LETTER

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

SUBJECT: Tracy's Hairstyles, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Tracy G Shepard

Name (Printed or typed)

3018 Harpers Ferry Drive

Address

Tallahassee, FL 32308

City, State & Zip

850-510-5593

Daytime Telephone number

spencer6777@centurylink.net

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: Tracy's Hairstyles, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3018 Harpers Ferry Drive

3018 Harpers Ferry Drive

Tallahassee, FL 32308

Tallahassee, FL 32308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide hair cutting and styling services to people.

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TALLAHASSEE, FL 32309

ARTICLE IV SHARES

The number of shares of stock is: 0

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tracy Shepard, Owner Name and Title:

Address 3018 Harpers Ferry Drive Address:

Tallahassee, FL 32308

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

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: Spencer Shepard

Address: 528 E. Park Avenue

Tallahassee, FL 32308

ARTICLE VII INCORPORATOR

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

Name: Tracy G. Shepard

Address: 3018 Harpers Ferry Drive

Tallahassee, FL 32308

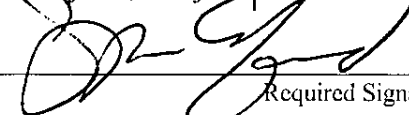
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

6-15-2015

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

6-15-2015

Date