

P160000053632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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(Business Entity Name)

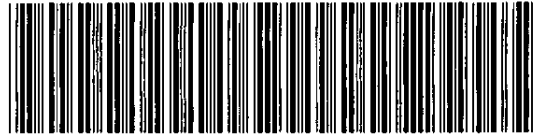
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FILED
16 JUN 17 PM 3:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

VH

COVER LETTER

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

SUBJECT: NADINE BEAUTY SERVICES 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: NADINE GABEAU

Name (Printed or typed)

15399 NE 6TH AVENUE APT A 105

Address

MIAMI, FLORIDA 33162

City, State & Zip

786 202-3363

Daytime Telephone number

ngabeau@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)

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16 JUN 17 PM 3: 29

ARTICLE I NAME
The name of the corporation shall be: NADINE BEAUTY SERVICES, INC

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

346 NE 167 STREET

NO. MIAMI BEACH, FL 33162

15399 NE 6TH AVENUE APT A 105

MIAMI, FLORIDA 33162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE PURPOSE OF THE THE CORPORATION IS TO PROVIDE
QUALITY BEAUTY SERVICES TO OUR COMMUNITY

ARTICLE IV SHARES

The number of shares of stock is: 12

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NADINE GABEAU (PRES.)

Name and Title: BILLY GABEAU (DIRECTOR)

Address: 15399 NE 6TH AVENUE APT A 105

Address: 15399 NE 6TH AVENUE APT A 105

MIAMI FLORIDA 33162

MIAMI, FLORIDA 33162

Name and Title: CLODINE DESAILLE (SECRETARY)

Name and Title: _____

Address: 15399 NE 6TH AVENUE APT A 105

Address: _____

MIAMI, FLORIDA 33162

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

FILED

Name and Title: _____ Name and Title: 16 JUN 17 PM 3:29
Address: _____ Address: SECRETARY OF STATE

_____ TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: NADINE GABEAU
Address: 15399 NE 6TH AVENUE APT A 105
MIAMI, FLORIDA 33162

ARTICLE VII INCORPORATOR

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

Name: NADINE GABEAU
Address: 15399 NE 6TH AVENUE APT A 105
MIAMI, FLORIDA 33162

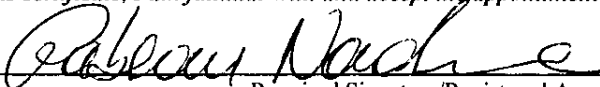
ARTICLE VIII EFFECTIVE DATE:

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

06/15/2016
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

06/15/2016
Date