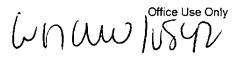
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(Re	equestor's Name)		
,	·		
(Address)			
(Addiess)			
(Address)			
(Ci	ty/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Name)		
(Do	ocument Number)		
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			
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E SCOTT



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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2017

JACOBO & ASSOCIATES, INC. 6220 W 21 CT HIALEAH, FL 33018

SUBJECT: POLISHED BEAUTY BAR INC.

Ref. Number: W17000010842

We have received your document for POLISHED BEAUTY BAR 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation.

One or more major words may be added to make the name distinguishable.

P15000013680-POLISHED BEAUTY BAR INC,

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 017A00002401

6220 West 21" Ct. Histeah, FL 33016 PHONE 305-556-0044 FAX 305-556-0076

Jacobo & Associates Inc.

Fax

To:	FL Dept. of S	tate – Divisior	of Corporations From:	Janet Vega – Polisho	ed Beauty Bar, Inc.	-
Fax:	850-245-6804	l	Pages	: 2 cover incld		_
Phone	850-245-6	052	Date:	02/10/2017	·	
Re:	Polished B	eauty Bar,	inc. Doc#: W17000	010842		_
□ Urg	ent 🗹 Fo	r Review	☐ Please Comment	☑ Please Reply	□ Please Recycle	
• Con	nments:					-
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	Ja	ndar	٠ ١			

Department of State
Division of Corporations
Tallahassee, FL

02/10/2016

Ref: Document number W17000010842

To whom it may concern:

The present letter is to let you know that I have no intent to file a reinstatement for POLISHED BEAUTY BAR, INC. with the above-mentioned document number.

Please release the name to use on this new corporation. I will be opening the company again with the same name and the same owner.

Also, in accordance with the document error number above, I would like to specify that Polished Beauty Bar, Inc. will have one hundred (100) Shares.

Thanks for your help and support on this matter; feel free to contact me as soon as possible in any case necessary.

Sincerely yours

JANET VEG

COVER LETTER

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

SUBJECT: POLISH	IED BEAUTY BAR INC			
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status	
		ADDITIONAL CO	OPY REQUIRED	
FROM:		e (Printed or typed)		
622	0 W 21 CT	Address		
ніл	ALEAH, FL 33018	Address		
	City	, State & Zip		
(30	5) 556 - 0044			
	Daytime '	Telephone number		
INF	O@JACOBOTAX.COM			
	E-mail address: (to be use	ed for future annual report	notification)	

NOTE: Please provide the original and one copy of the articles.

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

The name of the corpor	a.p.,, a.p.,		
ARTICLE II PRIN	CIPAL OFFICE Principal street address	Mailing a	ddress, if different is:
16455 NW 67TH AVI	3.		<u> </u>
MIAMI LAKES, FL 3	3014		
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ARTICLE III PURP The purpose for which	the corporation is organized is: ANY	AND ALL LAWFUL BUSINES:	S.
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The number of shares o	f stock is: AL OFFICERS AND/OR DIRECTOR Ie: BEST OF THE STATE OF TH		
ARTICLE V INITI	f stock is: AL OFFICERS AND/OR DIRECTOR JANET VEGA, PRESIDENT 7101 W TROON CIRCLE	RS Name and Title:	
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The number of shares of ARTICLE V INITI Name and Tit Address	f stock is: AL OFFICERS AND/OR DIRECTOR JANET VEGA, PRESIDENT 7101 W TROON CIRCLE HIALEAH, FL 33014	RS Name and Title: Address:	
The number of shares of ARTICLE V INITI Name and Tit Address	f stock is: AL OFFICERS AND/OR DIRECTOR JANET VEGA, PRESIDENT 7101 W TROON CIRCLE	RS Name and Title: Address:	200 200 200 200 200 200 200 200 200 200
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mame a	nd Litte:	Name and Title:
Addres	is	Address:
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) o	of the registered agent is:
Name:	JACOBO & ASSOCIATES INC	
Address:	6220 W 21 CT	
	PHALEAH, FL 33014	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	
The <u>name and</u> a	address of the Incorporator is:	
Name:	JACOBO & ASSOCIATES INC	
Address:	6220 W 21 CT	
	HIALEAH, FL 33014	_
Effective date, i	EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific and cann	(OPTIONAL) not be more than five days prior or 90 days after the
	te inserted in this block does not meet the applicable effective date on the Department of State's records	le statutory filing requirements, this date will not be listed as s.
Having bean m this certificate.	amed as registered agent to accept service of proce I am familiar with and arcept the appointment	ess for the above stated corporation at the place designated in this capacity
	OLU CUU	02/01/2017
	Required Signature Registered Agent	Date
	ocument and affirm that the facts stated herein ar Department of State constitutes a third degree felo	re true. I am aware that the false information submitted in ony as provided for in s.817.155, F.S.
1,	Tout 1/ean.	02/01/2017
R	dired Signature/Incorporator	Date