## P180000 11488

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

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SEUNCIANISSEE, FLORIDATE
TALLANIASSEE, FLORIDATE

18 FEB -2 PHI2: 18

C	ORPORAT ACCESS,	-,	ou need ACCESS to the world
	INC.	th Avenue. Tallahassee, Florida 32303 ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666	
		•	WALK IN
		PICK UP:	2/2/18
	CERTIFI	ED COPY	
Ϊ́	РНОТОС	СОРУ	
	CUS	-	
X	FILING		INC.
	HAIR	PROS INC.	
•		AME AND DOCUMENT #)	
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SPECIAL INSTRUCTIONS:

(CORPORATE NAME AND DOCUMENT #)

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6.

## **COVER LETTER**

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

SUBJECT:	HAIR PROS	5 INC,
	(PROPOSED CORPO	orate name - MUST INCLUDE SUFFIX) c articles of incorporation and a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50  Filing Fee Filing Fee, & Certified Copy Certificate of Status  ADDITIONAL COPY REQUIRED
FROM:	POMPARO BEACH,	ACOBSON  Name (Printed or typed)  DER FL HIGH) WAY  Address SUITE E  FL 33064-6048  City, State & Zip
	TocCTAX PRO (	me Telephone number  ACC OM  e used for future annual report notification)  ACC OFF  e used for future annual report notification)  ACC OFF  e used for future annual report notification)  ACC OFF  E USER  TO THE TELEPHONE  TO TH

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

name of the corpo	AME oration shall be:	<i>WALL</i>					<del></del>
	RINCIPAL OFFI Principal street STAKE PU	address	Wit lod		ailing address.	if different is:	
	PREEK, FL						
FICLE III PU	TRPOSE the the corporation i	s organized is:	Hair 5	ALON			
			<del> </del>				<u>-</u>
ICLE V IN	of stock is:	RS AND/OR I	DIRECTORS	- -			
number of shares	of stock is:	RS AND/OR I	DIRECTORS  AM - PR Nai	nc and Title:	ELISSA 57	UART 1 Charles	SEC-1
number of shares	of stock is:  VITIAL OFFICE  ITHE: MALUAN  GAGS CA	RS AND/OR I BOUKZI	DIRECTORS  AM - PR Nat  CINCLE Add  33431-160	8	ELISA ST 380 U BUCA P.		ADY, C.
number of shares  TICLE V IN  Name and Ti  Address	of stock is:  VITIAL OFFICE  ITHE: MALUAN  GAGS CA	RS AND/OR I BOUKZI MOLIMA MOLIMA	AM - PR Nai CINCLE Add 3343/ 160	* -	BUCA Pa	AYON, FI	APT.C.
number of shares  TICLE V IN  Name and Ti  Address	of stock is:  VITIAL OFFICE  ITHE: MARWAN  BOCA RA	RS AND/OR I BOUKZI MOLINA CON, FL	AM - PR Nai CINCLE Add 3343/ 160	ne and Title:_	BUCA Pa	AYON, FO	AP1, C.
Name and Tit Address  Address	of stock is:  VITIAL OFFICE  ITHE:  MAKWAN  BOCA RA	RS AND/OR I	AM - PR Nai CiNCLE Add 3343/ 160	ne and Title:dress:	Buc A R.	AYON, FO	Apy, Co.

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable)	) of the registered agent is:	
Name:	MARWAN BOOKZAM	<del></del>	
Address:	4690 N. STATE ROAS 7-UNIT	1/02	
	MARWAN BOOKZAM 4690 N. STATE ROAS 7-UNIT COCANUT CREEK, FL 3:	- 3013	
ARTICLE VII	INCORPORATOR		
The name and ad	Idress of the Incorporator is:		
Name:	JOEL G. JACOBSON		
Address:	4201 N. FEDERAL HIGHIGA	-SUITE E	
	JOEL G. JACOBERN 4201 N. FEDERAL HIGHMAN PUMPANO BEACH, FL 33	064-6048	
this certificate. Le	ned as registered agent to accept service of proce am familiar <b>A</b> ith and accept the appointment as t	registered agent and agree to act i	
11	Required Signature/Registered Agent	eginered agent and agree in acre	/ / ~
_///la	Required Signature/Registered Agent	<del></del>	2-62-8
	ument and affirm that the facts stated herein a		e information culmitted in a
	Department of State constitutes a third degree fel-		F.S. 1
AM	Bedurred Signature/Incorporator		2-/2/18
	Securited Signature/Incorporator		Date
V			A.C. 18
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