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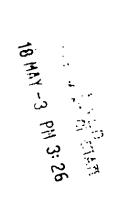
(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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TILED THE SECTION OF THE SECTION OF

COVER LETTER

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

SUBJECT: PRINCE	SS HAIR AND BEAUTY 1 INC		
30bjEc1	(PROPOSED CORPORA	TË NAME – <u>MUST INCL</u>	UDE SUFFIX)
Englaced are an original	inal and ana (1) same of the art	ialas afinaamassian an	da abaale fam
Eliciosed are all orig	inal and one (1) copy of the art	icles of incorporation and	a a check for:
S70.00	\$78.75	□ \$78.75	\$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	& Certificate of
		ADDITIONAL CO	Status OPY REQUIRED
FRA	ANK RONG		
FROM:		<u> </u>	
	Name	(Printed or typed)	
3110	6 CAPITAL CIRCLE NE STE 3		
		Address	
	·		
TAI	LLAHASSEE, FL 32308		
	City,	State & Zip	
	·	•	
8500	5684925		
	Daytime T	elephone number	
FRA	NK@VERYGOODCPA.COM		
	E-mail address: (to be used	for future annual report i	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 corpora	PRINCESS HAIR AND BEAU	JTY I INC	
ARTICLE II PRINC 3839 N MONROE ST I TALLAHASSEE FL 32	CIPAL OFFICE Principal street address JNIT 4-6		dress, if different is:
ADTICLE III DUDDA	DSE he corporation is organized is:	. PURPOSE	
ARTICLE V <u>INITIA</u>	stock is:		FILED 2013 HAY -3 PH 3: 2 ATTACHER TO A STATE OF THE STAT
Name and Title Address	ABDULGHANI LASWAD - PRESIDEN 3839 N MONROE ST UNIT 4 TALLAHASSEE FL 32308		
Name and Title:			
Name and Title:		Address:	

Name a	nd Title:	Name and Title:
Addres		Address:
	REGISTERED AGENT	
The <u>name and I</u> Name:	Florida street address (P.O. Box NOT acceptable FRANK RONG CPA	e) of the registered agent is:
Address:	3116 CAPITAL CIRCLE NE STE 3	
	TALLAHASSEE, FL 32308	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	
The name and a	address of the Incorporator is:	
Name:	ABDULGHANI LASWAD	
Address:	3939 N MONROE ST UNIT 4	
	TALLAHASSEE FL 32303	<u> </u>
Effective date, i (If an effective filing.)		(OPTIONAL) nnot be more than five days prior or 90 days after the ble statutory filing requirements, this date will not be listed a
the document's	effective date on the Department of State's record	ls.
Having been na this certificate, I	med as registered agent to accept service of proc am familiar with and accept the appointment as	cess for the above stated corporation at the place designated registered agent and agree to act in this capacity
_	Trus	5/3/2018
	Required Signature/Registered Agent	Date
I submit this do document to the	cument and affirm that the facts stated herein a Department of State constitutes a third degree fe	are true. I am aware that the false information submitted in lony as provided for in s.817.155, F.S.
Abi	PULGHANI / ASWAT)	5/3/2018
Requ	nired Signature/Incorporator	Date