

3/27/2018

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Center

Note: Please print the page and use as a cover sheet for the audit report.
The bottom of the report will be the bottom of all pages of the document.

(((H180000975053)))



H180000975053ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : PEREZ ARCHE AN ACCOUNTING & TAX SERVICES INC
Account Number : I20070000033
Phone : (305)649-7040
Fax Number : (305)643-3237

**Enter the email address for this business entity to be used for future
annual report mailings. Enter only one email address please.**

Email Address: AraicaIsabel@gmail.com

RECEIVED

2018 MAY -3 PM 1:33

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
REGISTRATION SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
HAIR STYLE BY SARITA CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2018 MAY -3 AM 11:40

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 04 2018

K. PAGE

May 2nd, 2018

Department of State
Division of Corporations

May 2nd, 2018

Dear Sr/Mrs:

Based in our conversation today, I am writing this letter confirming that the Corporation Named HAIR STYLE BY SARITA CORP under Document Number P16000077009 is of my property. I am the owner of this Corporation, for this reason I am sending this statement.

In the future I will not file any reinstatement for the Corporation named in this letter.

Thank You very much for your help.

Sincerely,

RECEIVED

2018 MAY -3 PM 1:32

DEPARTMENT OF COMMERCIAL
REGISTRATION SERVICES


SIGNATURE
SARA OVANDO
PRESIDENT

850-617-6381

4/3/2018 9:30:51 AM PAGE 1/001 Fax Server



April 3, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PEREZ ARCHE AN ACCOUNTING

SUBJECT: HAIR'S STYLE BY SARITA CORP
REF: W18000031598

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

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 unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is P160000077009.

If you have any further questions concerning your document, please call (850) 245-6052.

KYLE D BRUMBLEY
Regulatory Specialist II
New Filing Section

FAX Aud. #: H18000097505
Letter Number: 818A00006613

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

HAIR STYLE BY SARITA, CORP

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**1741 SW 1th STREET
MIAMI,FL 33135**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**SARA OVANDO
1741 SW 1th STREET
MIAMI,FL 33135**

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the corporation is:

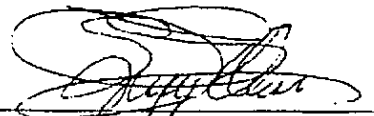
HAIR STYLE BY SARITA, CORP

1. The name and address of the registered agent and office is:

**SARA OVANDO
1741 SW 1th STREET
MIAMI, FL 33135**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN HIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



DATE

05/3/2018

ARTICLE V INCORPORATORS(S)

The name(s) and address (is) of the incorporator(s) to these Articles of Incorporation is (are):

**SARA OVANDO
1741 SW 1ST ST
MIAMI, FL 33135**

ARTICLE VI DIRECTOR(S)

The name (s) and street address (is) of the director(s) to these Articles Of Incorporation is (are):

**SARA OVANDO
1741 SW 1ST ST
MIAMI, FL 33135**

PRESIDENT

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this April 3, 2018.


SIGNATURE