

P19000010560

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COVER LETTER

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

SUBJECT: PAINTING NAILS SPA, 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: DAVID M. RUTHERFORD, INCOME TAX SPECIALIST

Name (Printed or typed)

P.O. BOX 5530

Address

DESTIN FL 32540

City, State & Zip

850-460-2995

Daytime Telephone number

COUNTRYPRO1@AOL.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)

ARTICLE I NAME

PAINTING NAILS SPA, INC.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

4463 COMMONS DRIVE WEST, SUITE D

DESTIN FL 32541

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO PROVIDE FOR THE GENERAL PUBLIC MANICURE AND

PEDICURE SERVICES IN ACCORDANCE WITH ALL FEDERAL, STATE, COUNTY, AND LOCAL LAWS.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HANG LE, PRESIDENT

Address: 871 SHORE DRIVE
MIRAMAR BEACH FL 32550

Name and Title: HANG LE, DIRECTOR

Address: 871 SHORE DRIVE
MIRAMAR BEACH FL 32550

Name and Title: HANG LE, SECRETARY

Address: 871 SHORE DRIVE
MIRAMAR BEACH FL 32550

Name and Title: INTENTIONALLY LEFT BLANK

Address: _____

Name and Title: INTENTIONALLY LEFT BLANK

Address: _____

Name and Title: INTENTIONALLY LEFT BLANK

Address: _____

Name and Title: INTENTIONALLY LEFT BLANK

Name and Title: INTENTIONALLY LEFT BLANK

Address

Address:

ARTICLE VI REGISTERED AGENT

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

Name: HANG LE

Address: 871 SHORE DRIVE

MIRAMAR BEACH FL 32550

ARTICLE VII INCORPORATOR

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

Name: HANG LE

Address: 871 SHORE DRIVE

MIRAMAR BEACH FL 32550

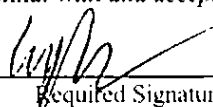
ARTICLE VIII EFFECTIVE DATE: JANUARY 31, 2019

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 days prior or 90 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.

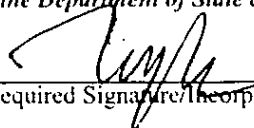
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

01/31/19

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

01/31/19

Date