

PROUD-64231

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : 120170000056

Phone : (954)842-2931

Fax Number : (954)842-2936

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

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2020 OCT 28 PM 4:10

FLORIDA PROFIT/NON PROFIT CORPORATION
BEAUTY CLUB AN, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

COVER LETTER

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

SUBJECT: BEAUTY CLUB AN, 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: ANASTAIIA ALIEV
Name (Printed or typed)

701 THREE ISLANDS BLVD, APT 206
Address

HALLANDALE BEACH, FL 33009
City, State & Zip

(754)226-6558
Daytime Telephone number

ANA311215@MAIL.RU
E-mail address: (to be used for future annual report notification)

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

420 0003 74 925 3

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: BEAUTY CLUB AN, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

701 THREE ISLANDS BLVD, APT 206701 THREE ISLANDS BLVD, APT 206HALLANDALE BEACH, FL 33009HALLANDALE BEACH, FL 33009**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARESThe number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ANASTAIIA ALIEV - P Name and Title: _____Address 701 THREE ISLANDS BLVD, APT 206 Address: _____HALLANDALE BEACH, FL 33009 _____Name and Title: ORKHAN ALIEV - VP Name and Title: _____Address 701 THREE ISLANDS BLVD, APT 206 Address: _____HALLANDALE BEACH, FL 33009 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

1190000374 9253

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: ANASTAIIA ALIEVAddress: 701 THREE ISLANDS BLVD, APT 206HALLANDALE BEACH, FL 33009**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: ANASTAIIA ALIEVAddress: 701 THREE ISLANDS BLVD, APT 206HALLANDALE BEACH, FL 33009**ARTICLE VIII EFFECTIVE DATE:**

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

Anastasia Aliev10/28/2020

Required Signature/Registered Agent

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.

Anastasia Aliev10/28/2020

Required Signature/Incorporator

Date

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