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

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516)935-3940
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: DONNA@THEBEAUTYED.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
THE BEAUTY ED INC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
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2021 FEB 24 PM 3:15

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DIVISION OF CORPORATIONS
COMMERCIAL
REGISTRATION SERVICES

H21000076154

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:

THE BEAUTY ED INC.

ARTICLE II PRINCIPAL OFFICE

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

3920 BELLE VISTA DRIVE EAST
ST PETE BEACH, FL 33706

ARTICLE III SHARES

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

1,500 SHARES AT NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DONNA FRANCIS
3920 BELLE VISTA DRIVE EAST
ST PETE BEACH, FL 33706

2021 FEB 24 PM 3:45

Prepared By:

Bruce B. Hubbard

238 W. Jericho Turnpike

Huntington Sta., NY 11746

1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

**DONNA FRANCIS - PRESIDENT / DIRECTOR
3920 BELLE VISTA DRIVE EAST, ST PETE BEACH, FL 33706**

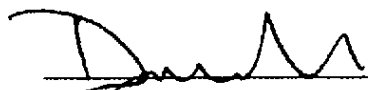
ARTICLE VI INCORPORATOR(S)

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

**DONNA FRANCIS
3920 BELLE VISTA DRIVE EAST, ST PETE BEACH, FL 33706**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

23RD day of FEBRUARY 20 21



DONNA FRANCIS
Signature

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **THE BEAUTY ED INC.**

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

DONNA FRANCIS

Name

3920 BELLE VISTA DRIVE EAST

(P.O. Box or Mail Drop Box NOT Acceptable)

ST PETE BEACH, FL 33706

(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.



DONNA FRANCIS
SIGNATURE

FEBRUARY 23, 2021

(Date)

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