

**PA2000042180**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
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From:  
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
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FLORIDA  
CORPORATIONS  
COMMERCIAL  
SERVICES

**FLORIDA PROFIT/NON PROFIT CORPORATION  
MIS GEMELAS BEAUTY SALON, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2022 MAY 31 PM 7:36

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## **ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:

MIS GEMELAS BEAUTY SALON, INC.

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

11865 SW 26 ST, SUITE C-33.  
MIAMI, FL 33175

**ARTICLE III SHARES:** The number of shares of stock is: **1000**.

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

MARIANA SANDREA - **PRESIDENT**

11865 SW 26 ST, SUITE C-33.  
MIAMI, FL 33175

MARIA L SANDREA – **VICE-PRESIDENT**

11865 SW 26 ST, SUITE C-33.  
MIAMI, FL 33175

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida Street address (PO Box not acceptable) of the registered agent is:

MARIANA SANDREA

11865 SW 26 ST, SUITE C-33.  
MIAMI, FL 33175

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**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

MARIANA SANDREA

11865 SW 26 ST, SUITE C-33.  
MIAMI, FL 33175

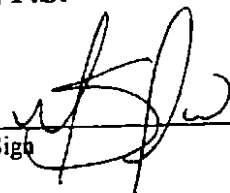
**Required Signatures:**

**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**

  
\_\_\_\_\_  
Registered Agent Sign

05/27/2022  
\_\_\_\_\_  
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.**

  
\_\_\_\_\_  
Incorporator Sign

05/27/2022  
\_\_\_\_\_  
Date

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