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DATE:

06/09/22

NAME: SKIN DESIGN TATTOO MIAMI INC.

TYPE OF FILING: ARTICLES

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AUTHORIZATION: ABBIE/PAUL HODGE

## **COVER LETTER**

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

SUBJECT: Ski	n Design Tatto	o Miami Inc	
	* (PROPOSED CORPOR/	YTE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	facheck for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: <u>↓</u>	<u>Nelissa Lebonne</u> Nam	e (Printed or typed)	
31	579 E Footbull F	Slvd #335 Address	<del></del>
	Pasadena CH C	(1107) State & Zip	
	10210 - 308 - 12 Daytime 1	elephone number	
	Melissa Djayla	hn . com	otification)

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)

The name of the corpor	Eation shall be: <u>SKiM DeSiGM</u>	lattoc Miant In	<u>C</u>
ARTICLE II PRIN			lress, if different is: # 335 AULI BIVA # 335 A 511107
ARTICLE III PURI The purpose for which	POSE the corporation is organized is: TCU	too Studio	
			2022 JUN -
			JUN -9 PH 12: 57
ARTICLE IV SHAI The number of shares o	<u>RES</u> f stock is: 100		HIZ: 57
Name and Tit	ALOFFICERS AND/OR DIRECTORS 10: ROBEV+ Pho-Preside		
Address	1943 Autumn Gold + Las Vegas NV 89123		
Name and Titl	e:	Name and Title:	
Address		Address:	
Name and Titl		Name and Title:	
Address		Address:	

Name and Title	•	Name and Title:	
Address		Address:	
		<del></del>	
ARTICLE VI REGI.	STERED AGENT	T acceptable) of the registered agent is	
_			
	hason pronbor		
	5 Office Plazo	•	
10	<u>llahassee, FL</u>	<u> 30.501</u>	
ARTICLE VII INCO	RPORATOR		
The name and address	of the Incorporator is:		
Name:	20 bevit Pho		
<del>-</del>	1943 Autumn	Gold Ave	
	Las Vegas, NI		
-	Lats beagles, 19	0 11.23	
ARTICLE VIII EFF	ECTIVE DATE:		
Effective date, if other (If an effective date is	than the date of filing: listed, the date must be spo	. (OPTIC	ONAL) Tays prior or 90 days after the
filing.)	-		
	ed in this block does not me te date on the Department of	et the applicable statutory filing requir State's records.	rements, this date will not be listed
		vice of process for the above stated cor tment as registered agent and agree to	
See attac			06/09/2022
	Required Signature/Regis	nered Agent	Date
I enhant this documen	t and affirm that the facts s	tated herein are true. I am aware tha	t the false information submitted i

## STATE OF FLORIDA

### REGISTERED AGENT CONSENT FORM

DATE: 06/09/2022

ENTITY NAME: Skin Design Tattoo Miami Inc

## REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee. FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated