

P23000082052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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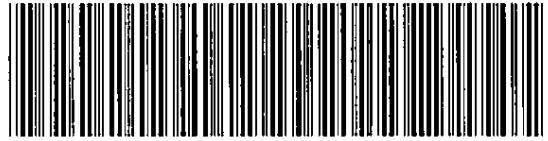
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**RIVERFRONT HAIR STUDIO, INC.**

2210 FRONT STREET  
SUITE 108  
MELBOURNE, FL 32901

September 29, 2023

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Document Number P03000077559  
RIVERFRONT HAIR STUDIO, INC.

Dear Sir or Madam:

The above referenced corporation has been administratively dissolved and I am sending this letter as an affidavit that I will not attempt to reinstate it. Instead, I am attaching the Articles of Corporation for a new corporation that has the same name, along with the required \$70 fee.

Sincerely,

A handwritten signature in black ink that reads "Andrea M. Bargelski". The signature is written in a cursive, flowing style.

Andrea M. Bargelski, President

## COVER LETTER

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

**SUBJECT:** Riverfront Hair Studio, 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:** Riverfront Hair Studio, Inc.  
Name (Printed or typed)

2210 Front St, Suite 108  
Address

Melbourne, FL 32901  
City, State & Zip

321-720-7500  
Daytime Telephone number

Andrea.riverfront@yahoo.com  
E-mail address: (to be used for future annual report notification)

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

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TALLAHASSEE

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be: Riverfront Hair Studio, Inc

**ARTICLE II PRINCIPAL OFFICE**

2210 FRONT STREET  
SUITE 108  
Melbourne, FL 32901

Principal street address

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business activity

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Andrea Bargelski, President

Address: 2210 FRONT STREET  
SUITE 108

Melbourne, FL 32901

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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CLERK OF DISTRICT COURT  
JULIA H. ST.

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Andrea Bargelski

Address: 2210 FRONT STREET  
SUITE 108  
Melbourne, FL 32901

**ARTICLE VII INCORPORATOR**

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

Name: Andrea Bargelski

Address: 2210 FRONT STREET  
SUITE 108  
Melbourne, FL 32901

**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*

Andrea Bargelski  
Required Signature/Registered Agent

9.29.23  
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.*

Andrea Bargelski  
Required Signature/Incorporator

9.29.23  
Date