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Division of Corporations

Florida Department of State

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SECRETARY OF STATE
TALLAHASSEE, FL

FLORIDA PROFIT/NON PROFIT CORPORATION

FANTASTIC NAILS SALON AND SPA 1 CORP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: **FANTASTIC NAILS SALON AND SPA 1 CORP****ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

10200 NW 25TH ST STE A-103

10200 NW 25TH ST STE A-103

DORAL, FL 33178

DORAL, FL 33178

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: **NAILS AND SPA SALON****ARTICLE IV SHARES**The number of shares of stock is: **100 SHARES****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **DANIEL D. BRITO CONCHADO**

Name and Title: _____

Address

6934 NW 113TH PL

Address: _____

DORAL, FL 33178

PRESIDENT

Name and Title: **IVAN M. BRITO CONCHADO**

Name and Title: _____

Address

6934 NW 113TH PL

Address: _____

DORAL, FL 33178

VICE-PRESIDENT

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

IVAN M. BRITO CONCHADO

6934 NW 113TH PL

DORAL, FL 33178

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: DANIEL D. BRITO CONCHADO
Address: 6934 NW 113TH PL
DORAL, FL 33178

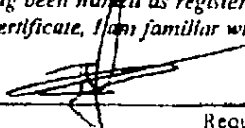
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ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: OCTOBER 09, 2024. (OPTIONAL.)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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.

X 

Required Signature/Registered Agent

OCTOBER 09, 2024

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.

X Daniel Brito

Required Signature/Incorporator

OCTOBER 09, 2024

Date