

Florida Department of State

Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION

SANABRIA BEAUTY STYLE INC

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

RECEIVED

2025 JAN -8 PM 2:02

STATE OF FLORIDA

2025 JAN -8 PM 4:07
STATE

JAN 9 2025

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: SANABRIA BEAUTY STYLE INC**ARTICLE II PRINCIPAL OFFICE**Principal street address9750 SW 181 STMIAMI, FL 33157

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: MARIA ALEJANDRA SANABRIA TORRES - P

Name and Title: _____

Address 9750 SW 161 ST

Address: _____

MIAMI, FL 33157

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

STATE
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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: MARIA ALEJANDRA SANABRIA TORRES
Address: 9750 SW 161 ST
MIAMI, FL 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIA ALEJANDRA SANABRIA TORRES
Address: 9750 SW 161 ST
MIAMI, FL 33157

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

Maria Sanabria 01/06/2024
Required Signature/Registered Agent 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.

Maria Sanabria 01/06/2024
Required Signature/Incorporator Date