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TRANSMITTAL LETTER

FILED

95 MAY 25 PM 4:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

700001489737  
-05/25/95--01024--013  
\*\*\*122.50 \*\*\*122.50

SUBJECT: REFLECTIONS OF YOU HAIR DESIGNERS, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☒ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM: REFLECTIONS OF YOU  
Name (printed or typed)

307 SE PORT ST LUCIE BLVD  
Address

PORT ST LUCIE, FLA. 34983  
City, State & Zip

\_\_\_\_\_  
Daytime Telephone number

PAID 531

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

## ARTICLES OF INCORPORATION

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TALLAHASSEE, FLORIDA

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

REFLECTIONS OF YOU HAIR DESIGNERS, INC

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

307 PORT ST LUCIE BLD.  
PORT ST LUCIE, FLA. 34983

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EDNA JINKS  
307 PORT ST LUCIE BLD  
PORT ST LUCIE, FLA. 34983

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

EDNA JINKS  
307 PORT ST LUCIE BLVD  
PORT ST LUCIE, FLA. 34983

KIM HATHCOX  
1741 SW ADVANA  
PORT ST LUCIE, FLA. 34983

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

9TH day of MAY, 19 95.

X Edna Jinks  
Signature

X Kimberly Hathcox  
Signature

\_\_\_\_\_  
Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: REFLECTIONS OF YOU HAIR  
DESIGNERS, INC.

2. The name and address of the registered agent and office is:

EDNA JINKS  
(NAME)  
307 PORT ST LUCIE BLVD  
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)  
PORT ST LUCIE FLA. 34983  
(CITY/STATE/ZIP)

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*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Edna Jinks  
(SIGNATURE)

5-9-95  
(DATE)