P9500050023

TRANSMITTAL LETTER

Department of Star Division of Corpora P.O. Box 6327 Tallahassee, FL 33	ations	SECURE STURY OF THE SECURE
A		2
SUBJECT:	arol & Hair CARE	
	(proposed corporate name)	FLORIDA
Enclosed ase fir above corpulation	nd an original and one (1) copy of the articles of and check in the amount of \$	incorporation for the
		5000000150037008 -06/07/9501037008 *****70.00 *****70.00
FROM:	Name	
	POBOX 2275 Address	
	Falm C. T. FL 34990 City, State, & Zip	
	(407) 286 0866 Telephone Number	<u> </u>
		. Ar.
		WN 28 1995

Note: Additional copy of articles is needed only when certified copy is requested.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 15, 1995

CAROL L. CHRISTENSON P.O. BOX 2235 PALM CITY, FL 34990

SUBJECT: CAROL'S HAIR CARE Ref. Number: W95000012229

We have received your document for CAROL'S HAIR CARE and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article(s) IV.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6924.

Sharon Tala Document Specialist Supervisor

Letter Number: 695A00029500

ARTICLES OF INCORPORATION

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

ARTICLE I NAM	ΛE
---------------	----

The name of the corporation shall be:

Carol's Hair Care, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Cawla Hair au Inclo arigina Naturals Rd. I.O. Box 1616
Palm City, Il 34990

ARTICLE III

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Caul & Christonum 2317 J. C. Addison ST Dr. ST. Lucie, + L 34984

ARTICLE V INCORPORATOR(S)

tion is (are): Cauld Christenson 2317 S. C. Addison St. Pl. H. Lucie, Fl 34984	
The undersigned has(have) executed these Articles of Incorporation this 3 / 45 / day of	<u>'</u>

CERTIFICATE OF DESIGNATION 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: CARO I S Hair CARE TAK.
2.	The name and address of the rer predagent and office is: 2317 J. C. ANAME ON JT.
	(P.O. BOX NOT ACCEPTABLE)
	- Port ut. Lucie, FL 34984 The IT
	(CITY/STATE/ZIP)
	SIGNATURE (corporate officer) TITLE Seridant DATE 5/31/35
THI ANI PRO	VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF OCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN IS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT D AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE OVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PER-RMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT FILING FEE: \$35.00

DATE