

P96000017319

TRANSMITTAL LETTER

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

300001722753
-02/23/96--01066--007
****122.50 ****122.50

SUBJECT: LC Hairbraiding Studios, 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

FROM:

Lianne Taverna
Name (Printed or typed)

PO Box 420503
Address

Summerland Key, FL 33042
City, State & Zip

305-745-1841
Daytime Telephone number

TALLAHASSEE, FLORIDA
FEB 23 PM 12:20
FEB 26 1996

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

FILED
25 FEB 23 PM 12:20
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

OF

LC Hair Weaving Studio Inc

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:

LC Hair Weaving Studio Inc

ARTICLE II - PRINCIPAL OFFICE

The principal place of business shall be:

5527 W. Oakland Park Blvd
(Physical street address)

Ft. Lauderdale, FL 33313
(City, State, and Zip Code)

The mailing address of the Corporation shall be:

5527 W. Oakland Park Blvd
(Street or P.O. Box)

Ft. Lauderdale, FL 33313
(City, State, and Zip Code)

ARTICLE III - CAPITAL STOCK

The authorized capital stock of the Corporation shall be 5,000 shares of common stock with a par value of \$1.00 per share. The Corporation plans to initially issue 500 shares, reserving the balance for subsequent issuance.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The following person shall serve as registered agent for the Corporation at the address stated:

Ce-Lia Gonzalez
Signature

5527 W. Oakland Park Blvd
(Street Address)

Ce-Lia Gonzalez
Print or Type Name

Ft. Lauderdale, FL 33313
(City, State, and Zip)

ARTICLE V - INCORPORATOR(S)

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

IN WITNESS WHEREOF, this is to certify that the undersigned incorporator, who shall also serve as initial director and registered agent, hereby makes, subscribes, acknowledges and files these Articles of Incorporation, in order to form a corporation under the laws of the State of Florida, and hereby accepts designation as registered agent.

INITIAL ADDRESS of
Corporation
and Incorporator

Ce-Lia Gonzalez
(Signature)

5527 W. Oakland Park Blvd
(Street Address)

Ce-Lia Gonzalez
(Name)

Ft. Lauderdale, FL 33313
(City, State, & Zip)

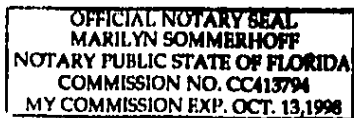
STATE OF FLORIDA

COUNTY OF MONROE

The foregoing instrument was acknowledged before me this 19th
day of February, 1996 by Co-Lia Gonzalez of
LC Hair Weaving Studio Inc, a Florida Coporation, on
behalf of the corporation. ~~and~~ she is personally known to me and
did not take an oath.

Marilyn Sommerhoff
NOTARY PUBLIC, STATE OF FLORIDA

Marilyn Sommerhoff
(TYPED OR PRINTED NAME)



CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 807.0501 OR 817.0501, 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: L.C. Hair Weaving Studio Inc
(must include suffix)

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

Ce-Lia Gonzalez

(Name)

5527 W. Oakland Park Blvd

(Street address - P. O. Box not acceptable)

Ft. Lauderdale, FL 33313

(City/State/Zip)

FILED
16 FEB 23 PM 12:20
TALLAHASSEE, FLORIDA

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.

Ce-Lia Gonzalez
(Signature)

2/19/96

(Date)