

P96000081874

TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 SEP 30 PM 1:20

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

000001960490
-10/01/96--01032--009
****122.50 ****122.50

SUBJECT: FAMILY AFFAIR HAIR TRIO, 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: DADE COUNTY BUSINESS MGMT
Name (printed or typed)
1190 N. E. 125th St., #21
Address
North Miami, FL 33161
City, State & Zip
305- 891-0112
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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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:

FAMILY AFFAIR HAIR TRID, INC.

ARTICLE II PRINCIPAL OFFICE

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

1601 S. W. 81st Ave.
N. Lauderdale, Fl 33068

ARTICLE III SHARES

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

FOUR HUNDRED (400) SHARES AT ONE DOLLAR (\$1.00) PAR

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MADALINE NACCHIO LIVOLSI
3711 N. W. 118th Terr
Sunrise, Fl 33323

ARTICLE V INCORPORATOR(S)

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

Madaline Nacchio Livolsi	3711 N. W. 118th Terr Sunrise, Fl 33323
Mary Martellaro	" "
Sabina Calabria	11420 N. W. 36th Place Sunrise, Fl 33323
Rosemarie Nacchio	3711 N. W. 118th Terr Sunrise, Fl 33323

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
27th day of September, 19⁹⁶.

x Madaline Nacchio Livolsi
Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: Family Affair Hair Trio, Inc.

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

MADALINE NACCHIO LIVOLSI

(Name)

3711 N. W. 118th Terr

(P.O. Box ~~not~~ acceptable)

Sunrise, FL 33323

(City/State/Zip)

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.

x Madaline Nacchio Livolsi
(Signature)

Sept 27, 1996

(Date)