

P96000086023

TRANSMITTAL LETTER

96 OCT 16 AM 7:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

000001965040
10/04/96--01037--010
***131.25 ***131.25

SUBJECT: SHARP Impressions INC.
(Proposed corporate name - must include suffix)

W96-21349
502

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: Blossom M. Dickenson
Name (printed or typed)

7625 Coral Blvd
Address

MIRAMAR, FL 33023
City, State & Zip

(954) 989 2413
Daytime Telephone number

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

TH
10-18-96



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 9, 1996

BLOSSOM M. DICKENSON
7625 CORAL BLVD.
MIRAMAR, FL 33023

SUBJECT: SHARP IMPRESSIONS INC.
Ref. Number: W96000021349

We have received your document for SHARP IMPRESSIONS INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 696A00046033

← New Filing

10/13/96

To: Kathy Hyman.

From: Blossom M. Dickenson.

Ref: W96000021349

The game shall be

SHARP Impressions Beauty Salon INC.

Kindly process and return As soon
as possible

Thank you.

ARTICLES OF INCORPORATION

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

FILED
96 OCT 16 AM 7:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

SHARP Impressions
BEAUTY SALON INC.

ARTICLE II PRINCIPAL OFFICE

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

7625 CORAL Blvd
MIRAMAR, FL 33023

ARTICLE III SHARES

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

1000.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Blossom M. Dickenson
7625 CORAL Blvd.
MIRAMAR, FL 33023

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):

BLOSSOM M. DICKENSON
7625 CORAL BLVD.
MIRAMAR, FL 33023

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

30 day of September, 19 96.

(An additional article must be added if an effective date is requested.)

X Blossom M. Dickenson
Signature

Signature

Signature

Notarization is not required

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:

SHARP Impressions?
BEAUTY SALON INC

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

Blossom M. Dickenson
(NAME)
7625 CORAL Blvd.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)
MIRAMAR FL 33093
(CITY/STATE/ZIP)

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SECRETARY OF STATE
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.

X Blossom M. Dickenson
(SIGNATURE)

9/30/96
(DATE)