

# CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

*On file*

REQUEST TAKEN CONFIRMED APPROVED  
 DATE \_\_\_\_\_  
 TIME \_\_\_\_\_ CK No. \_\_\_\_\_  
 BY PPH \_\_\_\_\_

WALK-IN  
 Will Pick Up 11-7-1100 TAB 11/7

RE: Mail Preference  
Inc.

	C.C. FEE.	DISBURSED
<input type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> ( ) Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S- <u>000001998520--9</u>		
<input type="checkbox"/> Fictitious Name File		
	<u>11/07/96--01010--004</u>	
	<u>***122.50 ***122.50</u>	
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ( ) _____		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX ( ) _____ pgs.		
SUBTOTALS _____		

96 NOV -7 AM 10:35  
 FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____
	\$ _____

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 16% per Annum.

THANK YOU  
 from  
 Your Capital Connection

ARTICLES OF INCORPORATION  
OF  
NAIL PREFERENCE, INC.

FILED  
96 NOV -7 AM 10:35  
TALLAHASSEE, FLORIDA

The undersigned, acting as the Incorporator of a Corporation organized under the laws of the State of Florida, adopt the following Articles of Incorporation:

ARTICLE I - NAME

The name of the Corporation shall be:

NAIL PREFERENCE, INC.

The principal place of business of this corporation shall be:

5450 So State Road 7 #14, Hollywood, Fl 33021

ARTICLE II - DURATION

The Corporation shall have perpetual existence.

ARTICLE III - PURPOSE

This Corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

ARTICLE IV - CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any time is FIVE HUNDRED (500) shares of common stock, each share having a par value of ONE DOLLAR PER SHARE (\$1.00).

Authorized capital stock may be paid for in cash, services or property at a just value to be fixed by the Board of Directors of this Corporation at any regular or special meeting.

ARTICLE V - CAPITAL

The amount of capital with which the corporation will begin business will be not less than FIVE HUNDRED DOLLARS (\$500.00).

#### ARTICLE VI - INITIAL REGISTERED AGENT AND OFFICE

The street address of the initial registered office of this Corporation shall be:

5450 So State Road 7 #14, Hollywood, Fl 33021

and the name of the initial registered agent of this Corporation at that address is:

Shana Gentile

#### ARTICLE VII - INITIAL BOARD OF DIRECTORS AND OFFICERS

This Corporation shall have two Directors and Officers initially. The number of Directors and Officers may be either increased or diminished from time to time by the bylaws, but shall never be less than one. The name and address of the initial Directors and Officers of this Corporation are:

1. Shana Gentile  
10376 SW 18 St, Davie, Fl 33324  
Director , President, Treasurer
2. Romy Salazar Inman  
1171 SW 26 Avenue, #3, Ft. Lauderdale, Fl 33312  
Director , Vice President, Secretary

#### ARTICLE VIII - INCORPORATORS

The name and street address of the subscriber to these Articles of Incorporation is:

1. Shana Gentile  
10376 SW 18 St, Davie, Fl 33324


#### ARTICLE IX - INDEMNIFICATION

This Corporation shall indemnify any officer or director, or any former officer or director, to full extent permitted by law.

**ARTICLE X - AMENDMENT**

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

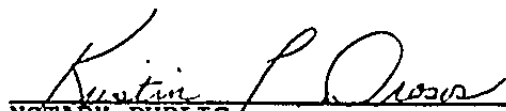
IN WITNESS WHEREFORE, the undersigned subscriber has executed these Articles of Incorporation, on this day :  
NOVEMBER 5, 1996

  
Shana Gentile  
Incorporator

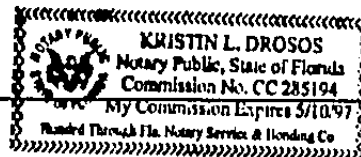
STATE OF FLORIDA )  
                          SS  
COUNTY OF BROWARD)

BEFORE ME, a Notary Public authorized to take acknowledgments in and for the State and County set forth above, personally appeared Shana Gentile known to me to be the person who executed the foregoing Articles of Incorporation, and who acknowledge before me that they executed the same for the purposes set forth therein.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, on this day: NOVEMBER 5, 1996

  
NOTARY PUBLIC,  
State of Florida, at Large

My Commission Expires



**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE  
FOR THE SERVICE OF PROCESS WITHIN THIS STATE,  
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.**

In Pursuance of Chapter 607.325, Florida Statutes, the following is submitted in compliance with said Act:

**BE IT KNOWN THAT:**

FIRST: That NAIL PREFERENCE, INC. desiring to organize or qualify under the laws of the State of Florida, with its principal offices as indicated in the Articles of Incorporation, at 5450 So State Road 7 #14, Hollywood, Fl 33021, has named Shana Gentile located at 5450 So State Road 7 #14, Hollywood, Fl 33021 as its agent to accept Service of Process within Florida.

**ACKNOWLEDGMENT**

Having been named to accept Service of Process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and I further agree to comply with the provisions of said Act relative to keeping open said office.

DATED on this day: NOVEMBER 5, 1996

By:

*Shana Gentile*  
Shana Gentile  
Registered Agent

FILED  
95 NOV-7 AM 10:35  
TALLAHASSEE, FLORIDA