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9/26/97

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305) 599-0839

NAME: POL-NIK & NAILS INC.

AUDIT NUMBER..... H97000016062

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. DF STATUS...1

PAGES..... 3

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ARTICLES OF INCORPORATION **QE**

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

ARTICLE I NAME

The name of the corporation shall be: POL-NIK & NAILS INC.

The principal place of business of this corporation shall be: 11398 West Flagler Street' Miami, Florida 33174

ARTICLE II NATURE OF BUSINESS

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, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 5,000 Stock at \$1.00 Par Value.

ARTICLE IV TERM OF EXISTENCE This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected. Islarel:

DIRECTOR/PRESIDENT: Karen Buitrago 8300 S.W. 31st Street Miami, Fl 33155

DIRECTOR/SECRETARY: Paula Zamora 9686 Fountainbleau Blvd. Miami, Fl 33174

Prepared by: Alberto Tamayo 8300 S.W. 31st St. Miami, Fl 33155 (305) 227-2707

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are): Alberto R- Tomayo; 83005. W. 31 ft. Misson, 1733100
IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this
Signature(s) of Incorporator(s)
•

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607,325, 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. TI		ame of the corporation: -Nika Nails Inc
			ame and address of the registered agent and office is:
			(P.O. BOX NOT ACCEPTABLE)
	83	300.	S.W. 31 Street Mari ET 33NT (CITY/STATE/ZIP)
			(CITY/STATE/ZIP)
_	3: 3I	STATE LORIDA	SIGNATURE
7 7	26 PM	SEE, F	TITLE
_	97 SEP	SECRE LAS TALLAHAS	DATE September 26/1897

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

DATE Lophon Se 26, 1997