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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.
CONTACT: LIDIA FERNANDEZ
PHONE: (305)599-0839

ACCT#: 071001002335

FAX #: (305)716-0346

NAME: DOMINIC HAIR SALON, INC.

AUDIT NUMBER.....H98000000164

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

CERT. OF STATUS...1

PAGES..... 3

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

B. McKnight JAN 06 1998

ARTICLE OF INCORPORATION
OF

DOMINIC HAIR SALON, INC.

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:

DOMINIC HAIR SALON, INC.

The principal place of business of this corporation shall be:

490 PALM AVENUE
HIALEAH, FLORIDA 33010

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 State, 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 par value that this corporation is authorized to have outstanding at any one time is: 100 SHARES X \$10.00 = \$1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

Prepared by: Basic Accounting Service
692 W. 29th St.
Suite 09
Hialeah, Fl 33012
(305) 887-4185

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TALLAHASSEE, FLORIDA

ARTICLE V OFFICERS DIRECTORS

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

ROSALINA ARDERI
1781 SW 4 ST.
MIAMI, FL. 33135

DIRECTOR

ARTICLE VI INCORPORATOR(S)

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

ROSALINA ARDERI
1781 SW 4 ST.
MIAMI, FL. 33135

PRESIDENT, SECRETARY, TREASURER

(100 SHARES)

The undersigned has(have) executed these Article of Incorporation this 5th day of JANUARY, 19 98.

Rosalina Arderi
Signature/Title

Signature/Title

Signature/Title

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TALLAHASSEE FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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: _____
_____ DOMINIC HAIR SALON, INC. _____

2. The name and address of the registered agent and office is _____ ROSALINA ARDERI _____
(Name)

_____ 1781 SW 4 ST. _____

_____ (P. O. BOX NOT ACCEPTABLE) _____

_____ MIAMI, FLORIDA 33135 _____

_____ (CITY/STATE/ZIP) _____

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED 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 MY POSITION AS REGISTERED AGENT.

SIGNATURE _____

DATE _____

JANUARY 5, 1998