TRANSMITTAL LETTER

P98000033426

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	•	•	98 APR 10	
SUBJECT:	Hair By (Proposed corpor	Tio. rate name - must include suf	E, FL (Max)	
		v	300002485: -04/10/930: *****70.00	
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 CO	PY REQUIRED	
FROM: FIODOR MENDOZA. Name (Printed or typed)				
_	2033 SW 67 Ave			
_	Mi Ami Fl. 33155. City, State & Zip			
· _	Daytime Telephone number			

n Ortessen APR 1 3 1998

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.
ARTICLE I NAME The name of the corporation shall be:
The name of the corporation shall be: HAIR BY TIO DUC. SEE SO SEE SEE SEE SEE SEE SEE SEE SEE S
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
2033 SW 67 Avre 71. 33155.
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:
FIODOR MENDOZA. 2033 SW 67 Are WEST MIDNI Fl. 33155
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
FIODOR MENDOZA (PRES.)
EDUARDA G. MENOOZA (VICE)
128160/8W 10 tr. Misoni Fl. 33184.
1 (1 07 98.
City of A

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

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

O4 07 98.

Signature/Registered Agent

Date