

TRANSMITTAL LETTER

P 98000082140

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

200002644272--1
-09/21/98-01041-003
*****70.00 *****70.00

SUBJECT: DJ'S HAIR & NAIL BOUTIQUE, INC.
(Proposed corporate name - must include suffix)

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: JOANNE M. DOCTOR
Name (Printed or typed)

6414 GAINSBORO DR
Address

PORT RICHEY FL 34668
City, State & Zip

(727) 846-0684
Daytime Telephone number

FILED
98 SEP 21 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Joanne
AUTHORIZATION BY PHONE TO
CORRECT Principal address
DATE 9-22-98
BOG. EXAM [signature]

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

W-21714

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.

FILED
98 SEP 21 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

D J's HAIR & NAIL BOUTIQUE, INC.

ARTICLE II PRINCIPAL OFFICE

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

8034 SR 54 BLD 4, SUITE C
NEW PORT RICHEY, FL 34653

ARTICLE III SHARES

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

250,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

JOANNE M. DOCTOR
6414 GAINSBORO DR.
PORT RICHEY, FL 34668

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

JOANNE M. DOCTOR
6414 GAINSBORO DR.
PORT RICHEY, FL 34668

Joanne M. Doctor
Signature/Incorporator

September 17, 1998
Date

(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

Joanne M. Doctor
Signature/Registered Agent

September 17, 1998
Date