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Florida Department of State

Division of Corporations

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Fax Number : (850) 922-4001

From:

Account Name : L & I GALLO, INC.
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

QUESTION MARK NAIL SYSTEMS, INC.

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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 4, 1999

L & I GALLO, INC.

SUBJECT: QUESTION MARK NAIL SYSYSTEMS, INC.
REF: W99000000120

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name of the entity must be identical throughout the document.

SYSTEMS is misspelled in Article I.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6923.

Doris McDuffie
Corporate Specialist Supervisor

FAX Aud. #: H99000000126
Letter Number: 899A00000222

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Prepared By:

H99000000126 5

L & I Gallo, Inc.
1200 Danbury Ave.
Davie, Fl 33325
954-424-7239
Fax 472-9280

ARTICLES OF INCORPORATION OF

QUESTION MARK NAIL SYSTEMS, INC.

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**ARTICLES OF INCORPORATION OF
QUESTION MARK NAIL SYSTEMS, INC.**

The undersigned, for the purpose of forming a corporation under the Florida
Business Corporations Act do hereby adopt the following Articles of Incorporation:

**ARTICLE I
NAME**

The name of the corporation is **QUESTION MARK NAIL SYSTEMS, INC.**

**ARTICLE II
OFFICES**

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

**4687 S. UNIVERSITY DRIVE
DAVIE, FL. 33328**

The corporation may have such other offices, either within or without the State of
Florida, as the board of directors may designate, or as the business corporation may
require from time to time.

**ARTICLE III
PURPOSE**

The general purposes for which the corporation is organized are:

1. To engage in general services, including but not limited to: **WHOLESALE
DISTRIBUTION**
2. To transact any other lawful business for which corporations may be
incorporated under the Florida Business Corporation Act.

Prepared By:
L & I Gallo, Inc.
1200 Danbury Ave.
Davie, FL 33325
(954)424-7239 Fax (954)472-9280

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**ARTICLE IV
CAPITALIZATION AND SHARES**

The number of shares which the corporation is authorized to issue is 1000 common shares at 5.00 par value.

**ARTICLE V
REGISTERED AGENT**

The name and address of the initial registered agent shall be:


**ROSELINDA M. HAGENS
4687 S. UNIVERSITY DRIVE
DAVIE, FL. 33328**

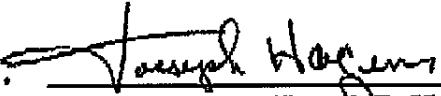
**ARTICLE VI
PRINCIPALS**

The number of principals constituting the initial board of principals is/are (2). The name and address of each principal is:

**ROSELINDA M. HAGENS
4687 S. UNIVERSITY DRIVE
DAVIE, FL. 33328**

**JOSEPH B. HAGENS
4687 S. UNIVERSITY DRIVE
DAVIE, FL. 33328**


President/Roselinda M. Hagens


Vice-President/Joseph B. Hagens

**ARTICLE VII
INCORPORATES**

The name and address of each incorporate is:

**PRESIDENT
ROSELINDA M. HAGENS
4687 S. UNIVERSITY DRIVE
DAVIE, FL. 33328**

**VICE-PRESIDENT
JOSEPH B. HAGENS
4687 S. UNIVERSITY DRIVE
DAVIE, FL. 33328**

The undersigned has (have) executed these Articles of Incorporation this

04 day of JANUARY, 1999



Signature/President



Signature/Vice-President

CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statements in designating the registered office / registered agent, in the state of Florida.

1. The name of the corporation is: **QUESTION MARK NAIL SYSTEMS, INC.**

2. The name and address of the registered agent and office is:

**ROSELINDA M. HAGENS
4687 S. UNIVERSITY DRIVE
DAVIE, FL. 33328**



Signature/Joseph B. Hagens

Title Vice-President

Date 01/04/99

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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the 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.



Signature/Roseline M. Hagens

Date 01/04/99