

P99000008852

TRANSMITTAL LETTER

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

200002754152--1
-01/25/99--01148--005
*****70.00 *****70.00

SUBJECT: MY SALON 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

FROM: ANNA BURRELL

Name (printed or typed)

6964 N.W. 19th Ct.

Address

MARGATE, FL 33063

City, State & Zip

(954) 752-5113

Daytime Telephone number

FILED
99 JAN 25 PM 4:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

TA-1/28/99

Tried to
call for princ. zip. - mach. only ✓

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

MY SALON, INC.

ARTICLE II PRINCIPAL OFFICE

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

9897 W. SAMPLE RD
CORAL SPRINGS, FL.

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANNA BURRELL
6964 N.W. 19th CT.
MARGATE, FL. 33063

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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

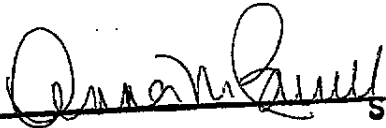
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ANNA BURRELL
6964 N.W. 19th Ct
MARGATE, FL. 33063

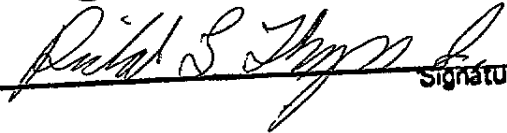
RICHARD THOMPSON
6964 N.W. 19th Ct
MARGATE, FL. 33063

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

20 day of JAN, 1999.



Signature



Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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: MY SALON, INC.

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

ANNA BURRELL

(Name)

6964N.W. 19th Ct

(P.O. Box not acceptable)

MARGATE, FL. 33063

(City/State/Zip)

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.


(Signature)

1-19-99

(Date)

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TALLAHASSEE, FLORIDA