PAGOOO 28633

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

400002816564--1 ---03/23/99--01102--021 *****78.75 ******78.75

SUBJECT:	Notorious Hair Design & Beauty Spa, Inc.			<u>.</u>
,	(Proposed corporate name - must include suffix)			
	1			
Enclosed is an or	riginal and one(1) copy of the artic	cles of incorporation and a	check for:	
☐ \$70.00 Filing Fee		□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy	
			& Certificate	
		ADDITIONAL COPY REQUIRED		
FRC	M: Carol A. Perant		- 	
	Name	(Printed or typed)		
	5139 Trouble C	5139 Trouble Creek Road		
		Address		99
		New Port Richey, FL 34652		F 1 L
1	Ci	City, State & Zip		
op/ smx				PM 2: 23
M. 2/201/1	\ Daytime	e Telephone number	RIDA	23

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

FILED

ARTICLES OF INCORPORATION

99 MAR 24 PM 2: 23

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

NOTORIOUS HAIR DESIGN & BEAUTY SPA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 12509 Spring Hill Drive, Spring Hill, FL 34609.

ARTICLE III SHARES

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

7,500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Gail Bryant 12509 Spring Hill Drive Spring Hill, FL 34609

ARTICLE V INCORPORATOR

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

SUSAN PERKINS 12509 Spring Hill Drive Spring Hill, FL 34609

Signature/Incorporator

3-19-4

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

al Oryant

3-19-90

Signature/Registered Agent

Date