

P99000029375

CARLTON THOMAS

Requestor's Name

304 SO. ORANGE BLOSSOM TRAIL

Address

ORLANDO FL 32805-407649-1000

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. THE HOUSE OF STYLES, INC. of Orlando, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time _____

☒ Certified Copy

☐ Mail out

☒ Will wait

☐ Photocopy

☐ Certificate of Status

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 MAR 31 AM 9:47

FILED

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-03/31/99--01036--001
*****78.75 *****78.75

Dmc
3/31/99

Examiner's Initials

DEPARTMENT OF CORPORATIONS
P.O. BOX 6237
TALLAHASSEE, FL.32310

DEAR SIR / MADAM ;

ATTACHED AND ENCLOSED ARE ARTICLES OF INCORPORATIONS FOR THE HOUSE OF STYLES ,INC. ALSO, ENCLOSED IS THE FILLING FEE AND TWO COPIES. PLEASE EXECUTE THESE DOCUMENTS AND RETURN A COPY TO ME. THE REGISTERED AGENT AND THE ADDRESS OF REGISTERED OFFICE IS VALERIE WALKER WHOM ADDRESS IS 3202 SOUTH ORLANDO AVENUE SANFORD FLORIDA ,32773.


VALERIE WALKER

ARTICLES OF INCORPORATION
FOR
THE HOUSE OF STYLES OF ORLANDO, INC.

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ARTICLE ONE

THE NAME OF THE CORPORATION IS THE HOUSE OF STYLES OF ORLANDO, INC.

ARTICLE TWO

THE PERIOD, TERM AND DURATION IS PERPETUALITY

ARTICLE THREE

THIS BUSINESS, IF GRANTED CORPORATE STATUS WILL COMMENCE ITS BUSINESS AS A FULL SERVICE RETAIL ENTITY, WHEREIN, WE WILL SALE LADIES AND MEN CLOTHING OF ALL KIND. THE BUSINESS WILL TRANSACT ALL OF ITS BUSINESS UNDER THE NAME OF "THE HOUSE OF STYLES INC". ALSO, IF GRANTED CORPORATE STATUS THE BUSINESS MAY CONDUCT ANY OTHER BUSINESS AS PROVIDED FOR BY STATUE.

ARTICLE FOUR

THE AGGREGATE NUMBER OF SHARES BY WHICH THE CORPORATION SHALL HAVE THE AUTHORITY TO ISSUE WILL BE 2,000 SHARES. EACH SHARE SHALL A PAR VALUE ON ONE DOLLAR EACH.

ARTICLE FIVE

THE CORPORATION WILL NOT COMMENCE ANY OF ITS BUSINESS UNTIL SUCH TIME AS IT HAS RECEIVED FOR THE ISSUANCE OF SHARES AN AMOUNT IN CONSIDERATION OF THE VALUE OF TWO THOUSAND DOLLARS.

ARTICLE SIX

THE STREET ADDRESS OF ITS INITIAL REGISTERED OFFICE IS 3202 SOUTH ORLANDO AVENUE, APARTMENT NUMBER 1104 SANFORD FLORIDA. ZIP CODE NUMBER 32773. THE NAME OF THE INITIAL REGISTERED AGENT IS VALERIE WALKER WHOSE ADDRESS IS 3202 SOUTH ORLANDO AVENUE, APARTMENT NUMBER 1104 SANFORD FLORIDA ZIP CODE 32773. PRINCIPAL PLACE OF BUSINESS IS THE SAME AS THE REGISTERED OFFICE.

ARTICLE SEVEN

THE NUMBER OF DIRECTORS WHICH SHALL CONSTITUTE THE BOARD DIRECTORS IS IS ONE. THE NAME AND ADDRESS OF THE PERSON WHO WILL SERVE AS DIRECTOR IS AS FOLLOWS.

NAME

Valerie Walker
VALERIE WALKER

ADDRESS

3202 SO ORLANDO AVE APT 1104
SANFORD FL. 32773

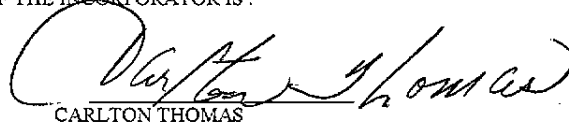
ARTICLE EIGHT

THE BOARD OF DIRECTORS SHALL HAVE THE POWER AND THE RIGHT TO DEVELOP, SET, AND OR MODIFY ITS BY-LAWS WITHOUT RESTRICTIONS OF THEIR POWERS AS CONFERRED BY STATUE.

ARTICLE NINE

THE NAME AND ADDRESS OF THE INCORPORATOR IS :

CARLTON THOMAS
304 SOUTH O.B.T.
ORLANDO FL. 32805.


CARLTON THOMAS

THE DUTIES AND POWERS OF THE INCORPORATOR SHALL CEASE ONCE THE BUSINESS IS GRANTED FULL CORPORATE STATUS.

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CERTIFICATE OF DESTINATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANISED UNDER THE LAWS OF FLORIDA SUMITS THE
FOLLOWING STATEMENTS IN DESIGNATING THE REGISTERED OFFICR/REGISTERED
AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS :

THE HOUSE OF STYLES OF ORLANDO, INC.

THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS :

VALERIE WALKER
(NAME)
3202 SOUTH ORLANDO AVE. APARTMENT NO. 1104
(P.O. BOXES NOT ACCEPTABLE)
SANFORD FLORIDA 32773
(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS
FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNED IN THIS
CERTIFICATE. I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND A
AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE
PROVISION OF ALL STATUES RELATING TO THE PROPER AND COMPLETE
PROFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE
OBLIGATIONS OF MY .

SIGNATURE

Valerie Walker

DATE

3-29-99