

TRANSMITTAL LETTER

P99000054895

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

**SUBJECT:** The Hair Exchange, Inc.  
(Proposed corporate name - must include suffix)

500002907105--2  
-06/17/99--01004--003  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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 of Status

☐ \$78.75 Filing Fee & Certified Copy  
☒ \$87.50 Filing Fee, Certified Copy & Certificate of Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Deborah M. Hill/Lynne Sellers  
Name (Printed or typed)  
3839 N. Monroe Street, Unit 10  
Address  
Tallahassee, Fl. 32303  
City, State & Zip  
(850)562-9672  
Daytime Telephone number

RECEIVED  
99 JUN 16 PM 4: 32  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED  
99 JUN 16 PM 4: 33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

6/16/99  
*[Signature]*

## 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.

### **ARTICLE I NAME**

The name of the corporation shall be:

The Hair Exchange, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

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

3839 N. Monroe Street, Unit 10  
Tallahassee, Fl. 32303

### **ARTICLE III SHARES**

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

200 (100 each Officer: Deborah M. Hill, Lynne Sellers)

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

*Deborah M. Hill*  
3839 N. Monroe Street, Unit 10  
Tallahassee, Fl. 32303

### **ARTICLE V INCORPORATOR**

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

*Deborah M. Hill*  
3839 N. Monroe Street, Unit 10  
Tallahassee, Fl. 32303

*Deborah M. Hill*

Signature/Incorporator

*6-16-99*

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

*Deborah M. Hill*

Signature/Registered Agent

*6-16-99*

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 JUN 16 PM 4:33

APPROVED  
AND  
FILED