

TRANSMITTAL LETTER

P99000100927

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

700003044667--1
-11/15/99--01131--006
*****78.75 *****78.75

SUBJECT:

Lets Make-up PERMANENTLY

(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 of Status

☒ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM:

Jennine Jaffe

Name (Printed or typed)

11712 Bay Breeze Ct.

Address

Wellington Fl. 33414

City, State & Zip

561-3893641

Daytime Telephone number

STATE
TALLAHASSEE
FLORIDA

NOV 15 PM 4:01

FILED

Jennine Jaffe GAVE
AUTHORIZATION BY PHONE TO
CORRECT *complete arts.*
DATE *11-18-99*
DOC. EXAM *af*

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

af 11/17

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:

Lets Make-up Permanently, Inc.

ARTICLE II PRINCIPAL OFFICE

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

11712 Bay Breeze CT.
Wellington, FL. 33414

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Jennine Jaffe
11712 Bay Breeze CT.
Wellington, FL. 33414

ARTICLE V INCORPORATOR

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

Jennine Jaffe
(same as above)


Signature/Incorporator

11.3.99

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.


Signature/Registered Agent

11.3.99

Date

FILED
99 NOV 15 PM 4:01
TALLAHASSEE, FLORIDA