

Florida Department of State

Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION

SANABRIA BEAUTY STYLE INC

Table with 2 columns: Description and Value. Rows include Certificate of Status (0), Certified Copy (1), Page Count (03), and Estimated Charge (\$78.75).

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: SANABRIA BEAUTY STYLE INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9750 SW 181 ST

MIAMI, FL 33157

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIA ALEJANDRA SANABRIA TORRES - P

Name and Title: _____

Address 9750 SW 161 ST

Address: _____

MIAMI, FL 33157

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARIA ALEJANDRA SANABRIA TORRES
 Address: 9750 SW 161 ST
MIAMI, FL 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIA ALEJANDRA SANABRIA TORRES
 Address: 9750 SW 161 ST
MIAMI, FL 33157

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Maria Sanabria 01/06/2024
 Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Maria Sanabria 01/06/2024
 Required Signature/Incorporator Date