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**LAZARUS  
CORPORATE FILING SERVICE**

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Office Use Only

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

1. LESLIE'S CREATIONS, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

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**NEW FILINGS**

☒ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

**Examiner's Initials**

## ***ARTICLES OF INCORPORATION***

*The undersigned incorporate (s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ***ARTICLE I - NAME***

*The name of the corporation shall be:*

LESLIE'S CREATIONS, INC.

### ***ARTICLE II - PRINCIPAL OFFICE***

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

6840 MAIN STREET  
MIAMI LAKES, FL 33014

### ***ARTICLE III - SHARES***

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

ONE HUNDRED SHARES AT \$1.00 PER VALUE

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

*The name and address of the initial registered agent is:*

LESLIE FUENTES  
11245 NW 57 LANE  
DORAL, FL 33178

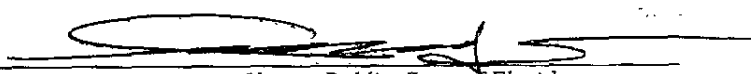
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**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE**

*Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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  
LESLIE FUENTES

*Witness my hand and official seal at Hialeah, Dade county, Florida, this 22 days of AUGUST 2005.*

  
Notary Public, State of Florida

*My Commission Expires:*



**Cristina C. Toral**  
Commission # DD 051490  
Expires Sep. 30, 2005  
Bonded Thru  
Atlantic Bonding Co., Inc.

## ARTICLE V - INCORPORATOR

*The name and street address of the incorporate to these Articles of Incorporation is:*

LESLIE FUENTES  
11245 NW 57 LANE  
DORAL, FL 33178

*The undersigned incorporator has executed these Articles of incorporation this 22 day of AUGUST 2005*

  
Signature  
LESLIE FUENTES

## ARTICLE VI - DIRECTOR (S)

*The name(s) and street address (s) of the director(s) to these Articles of Incorporation is (are):*

PRESIDENT  
VICE-PRESIDENT  
SECRETARY  
TREASURER

LESLIE FUENTES  
11245 NW 57 LANE  
DORAL, FL 33178

100 %

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