

PHENDEL HAVE LUGALARINANCIAL SERVICES

ACCOUNT NO.

072100000032

REFERENCE

158816

4720248

AUTHORIZATION

COST LIMIT

\$ 70.00

ORDER DATE: November 18, 1996

ORDER TIME :

11:07 AM

ORDER NO. : 158816-005

600002008376--6

CUSTOMER NO:

4720248

CUSTOMER: Ms. Julie Jurish Roberts & Mcgivney

33 North Dearborn

Suite 1800

Chicago, IL 60602

PH 2: 00

FOREIGN FILINGS

NAME:

GOLD COAST SKIN CARE, INC.

XXXX QUALIFICATION

(TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Michael E. Klunk

DIVISION OF CORPORATION SI AGN Si Na

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Illinois 336-3913945	
State or country under the law of which it is incorporated) (FEI number, if appli 9-15-93 B. Perpetual	Ø1 ≥=
(Duration: Year corp. will cease	to exist or "perpetual")
upon qualification	9
Date tirst transacted business in Florida. (See sections 607.1801, 607.1802, and 8	117.155, F.S.)
130 Satinwood Lane	Ÿ
Palm Beach Gardens, Florida 33410 (Current mailing address)	00
Skin care products and all related activities. (Purposs(s) of corporation authorized in home state or country to be carried out in	
Name and street address of Fforida registered agent:	the state of Fibrigal
Name: Corporation Service Company	
Office Address: 1201 Hays Street	

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

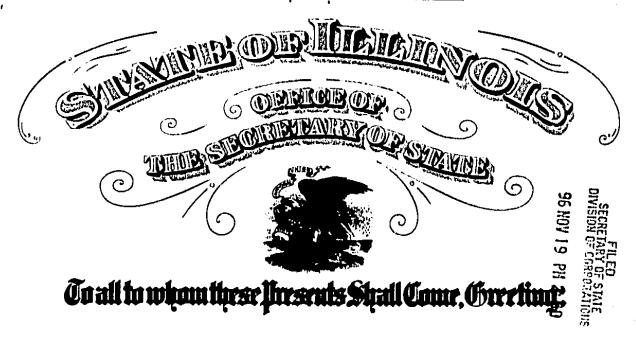
By Character Secretary (Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

¹ 12.	Names and addresses of o	ficers and/or directors:	
۸.	DIRECTORS		
	Chairman:		
	Address:		
	Vice Chairman	1:	
	Address:		_
	← Director: ←	Kenneth Beer	
	Address:	130 Satinwood Lane Palm Beach Gardens, Florida 33410	
	Director;		-
	Address:		
B.	OFFICERS		96,
	President:	Kenneth Beer	SION AON
	Address:	130 Satinwood Lane Palm Beach Gardens, Florida 33410	REFACE STATE OF CONFIDENCE OF
	Vice President:		FORE ST
	Address:		Tions
	Secretary:	Kenneth Beer	_
	Address:	130 Satinwood Lane Palm Beach Gardens, Florida 33410	·
	Treasurer:	Kenneth Beer	_ _
	Address:	130 Satinwood Lane Palm Beach Gardens, Florida 33410	
NOT direct	E: If necessary, you may atta tors.	ach an addendum to the application listing addition	al officers and/or
13.	(Signature of Chairman, Vice Chair	man, or any officer listed in number 12 of the application)	

Kenneth Beer, President
(Typed or printed name and capacity of person signing application)

File Number 5747-734-2



I, George H. Ryan, Secretary of State of the State of Alinois,



In Tro	limony M I	rereof,	I hereto set
	•		Great Seal of
	Illinois this	, .	15 T H
day of	NOVEMBER	A.D.,	19_96

George H Ryan
SECRETARY OF STATE