POODS OF TRANSMITTAL LETTER

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

1/6/2000

			•	
SUBJECT: HOME I	NEW LOOK, CO	RP.		
				0001073002
Enclosed is an original for:		by of the articles of	incorporation and	a check
≜ \$70.00 Filing Fee	Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	PHILIPP	E MARSOLAIS		
•	Name (printed or typed)			
	910 N 46th AVE		ACC	OO JAN
		Address		
	HOLLYWOOD	FL 33020	SSE	0
	City	State & Zip	ਜੁ	
•		4 591 0187	LORIDA	9: 37
	Daytime To	elephone number	—— »	1 -

ARTICLES OF INCORPORATION

TALLAHASSEE, FISIATE

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Busielly of Corporation Act, hereby adopt(s) the following Articles of Incorporation,

ARTICLE I NAME

The name of the corporation shall be:

HOME NEW LOOK, CORP.

ARTICLE II PRINCIPAL OFFICE

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

910 N 46th AVE HOLLYWOOD FL 33020

ARTICLE III SHARES

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

FIVE THOUSAND COMMON SHARES \$ 1.00 PAR VALUE ********

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

PHILIPPE MARSOLAIS 910 N 46th AVE HOLLYWOOD FL 33020

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

PHILIPPE MARSOLAIS 910 N 46 TH AVE HOLLYWOOD FL 33020

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this SITH day of JANUARY 2000 PHILIPPE MARKETOLINGS Signature NOTE: Affixing an officer title after a signature of an incorporator does not constitute the

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corp	oration is	O JAN T
The hand of the corp	HOME NEW LOOK, CORP.	SSEE
2. The name and address of the registered agent and office is:		9: 37 STATE FLORIDA
,	P <u>H</u> ILIPPE M ARSOLAIS - 910 N 46th A	,
<u>-</u>	* D ME 330.00	
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
	FOUND PI 3	
, , , , , , , , , , , , , , , , , , , ,	· (Cfty/State/Zip)	, See

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.

DIVISION OF CORPOR

TALLAHASSEE, FL 32314