

Fosth Accounting, P.A.



1185 EIGHTH STREET SOUTH ◆ NAPLES, FLORIDA 34102
Phone 941-435-7336 ◆ Fax 941-262-4848

PO00000018216
January 10, 2000

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

100003137561--0
-02/16/00--01060--017
*****87.50 *****87.50

Subject: Pure Perfection, Inc.

Dear Sirs,

Please find enclosed 2 copies of the Articles of Incorporation, and a check in the amount of \$87.50. (Filing Fee, Certified Copy & Certificate of Status). Please register this company as a Florida Corporation and return the certified copy of the Articles of Incorporation to:

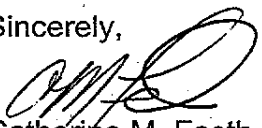
Please note that this name was already registered as a fictitious name and they are now incorporating this name. A copy of the name registration is also enclosed.

Fosth Accounting, PA
1185 8th Street South
Naples, FL 34102

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00 FEB 16 PM 2:31
DIVISION OF STATE
TALLAHASSEE, FLORIDA

Thank you for your assistance in this matter. If you need any further information, please feel free to contact me at the above telephone number.

Sincerely,


Catherine M. Fosth, CPA

C.C.
2-21-00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 18, 1999

PURE PERFECTION
4360 14TH AVE N.E.
NAPLES, FL 34120

Subject: **PURE PERFECTION**

REGISTRATION NUMBER: **G99230900196**

This will acknowledge the filing of the above fictitious name registration which was registered on August 18, 1999. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between July 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES. Whenever corresponding please provide assigned Registration Number.

Should you have any questions regarding this matter you may contact our office at (850) 488-9000.

/ss
Division of Corporations

Letter No. 999A00041666

ARTICLES OF INCORPORATION

The undersigned incorporator(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:

PURE PERFECTION, INC.

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STATE OF FLORIDA
TALLAHASSEE

ARTICLE II PRINCIPAL OFFICE

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

**2461 WOODLAND CIRCLE
FT. MYERS, FL 33907**

ARTICLE III SHARES

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

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**RICKY MARTIN DEHNZ
2461 WOODLAND CIRCLE
FT. MYERS, FL 33907**

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

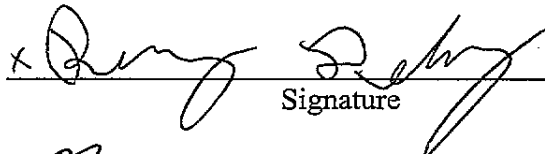
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

RICKY MARTIN DEHNZ
2461 WOODLAND CIRCLE
FT. MYERS, FL 33907

RYAN MARK DEHNZ
4360 14TH AVENUE N.E.
NAPLES, FL 34120

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

3rd day of JANUARY, 20 00



Signature



Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**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 corporation is: PURE PERFECTION, INC.

2. The name and address of the registered agent and officer is:

RICKY MARTIN DEHNZ

(Name)

2461 WOODLAND CIRCLE

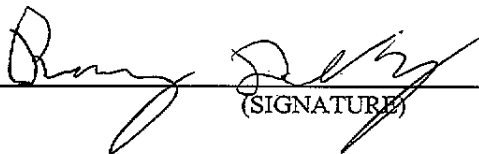
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

FT. MYERS, FL 33907

(CITY/STATE/ZIP)

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00 FEB 16 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

(DATE)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314