

**Form 39298**

**LAZARUS CORPORATE FILING SERVICE**

(Requestor's Name)

**3320 S.W. 87 AVENUE**

(Address)

**MIAMI, FLORIDA (305)552-5973**

(City, State, Zip)

(Phone #)

**TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)**

OFFICE USE ONLY

**FILED**  
00 APR 19 PM 2:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. MARLYN BODY SCRUB & SPA, INC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

500003214505--9  
-04/19/00-01053-011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input checked="" type="checkbox"/>	Reinstatement
<input checked="" type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**RECEIVED**  
00 APR 19 AM 10:55  
DEPARTMENT OF STATE  
DIVISION OF CORPORATE REGISTRATION  
TALLAHASSEE, FLORIDA  
Examiner's Initials

ARTICLES OF INCORPORATION  
OF

Marlyn Body Scrub & Spa, Inc.

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TALLAHASSEE FLORIDA

The undersigned subscriber(s) to these Articles of Incorporation, a natural person(s) competent to contract, hereby forms a corporation under the laws of the State of FLORIDA.

ARTICLE I NAME

The name of the corporation shall be Marlyn Body Scrub & Spa, Inc.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States and the State of Florida. However the primary purpose of the corporation is to provide body scrub services to individuals.

ARTICLE III CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV ADDRESS

The street address of the initial registered office of the corporation shall be 9175 SW 147<sup>th</sup> Avenue, Suite 3216, Miami FLORIDA 33196. The name of the initial Registered Agent for the corporation at that address is Onelia M Duran.

ARTICLE VI TERM OF EXISTENCE

This corporation shall exist perpetually.

\_\_\_\_\_

**ARTICLE VII**      **LIMITATION OF LIABILITY**

Each director, stockholder and officer, in consideration for his services, shall, in the absence of fraud, be indemnified, whether then in office or not, for the reasonable cost and expenses incurred by him in connection with the defense of, or for advice concerning any claim asserted or proceeding brought against him by reason of his being or having been a director, stockholder or officer of the corporation or of any subsidiary of the corporation, whether or not wholly owned, to the maximum extent permitted by law. The foregoing right of indemnification shall be inclusive of any other rights to which any director, stockholder or officer may be entitled as a matter of law.

**ARTICLE VIII**      **SELF DEALING**

No contract or other transaction between the corporation and other corporations, in the absence of fraud, shall be affected or invalidated by the fact that any one or more of the directors of the corporation is or are interested in a contract or transaction, or are directors or officers of any other corporation, and any director or directors, individually or jointly, may be a party or parties to, or may be interested in such contract, act or transaction, or in any way connected with such person or person's firm or corporation, and each and every person who may become a director of the corporation is hereby relieved from any liability that might otherwise exist from this contracting with the corporation for the benefit of himself or any firm, association or corporation in which he may be in any way interested. Any director of the corporation may vote upon any transaction with the corporation without regard to the fact that he is also a director of such subsidiary or corporation.

This corporation shall have a minimum of one director. The initial Board of Directors shall consist of:

**Onelia M. Duran   -   President**

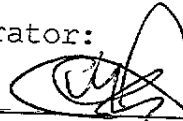
ARTICLE IX INCORPORATOR

The name and address of the incorporator is:

Onelia M. Duran  
9175 SW 147<sup>TH</sup> Avenue, Suite 3216  
Miami, Florida 33196

IN WITNESS WHEREOF, the undersigned has hereunto set his hand  
and seal on this 14th day of April, 2000.

Incorporator:



STATE OF  
COUNTY OF

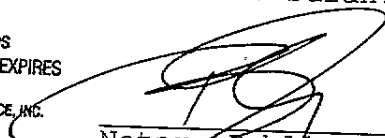
Florida  
Dade

The foregoing instrument was executed and acknowledged before  
me this 14th day of April, 2000, by Onelia M. Duran.



(SEAL)

Barrington G. Coombs  
MY COMMISSION # CC639337 EXPIRES  
April 17, 2001  
BONDED THRU TROY FARM INSURANCE, INC.

  
\_\_\_\_\_  
Notary Public  
State of FLORIDA  
My Commission Expires:

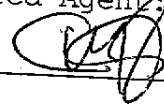
DESIGNATION OF AND ACCEPTANCE  
BY REGISTERED AGENT

The following is submitted in compliance with the laws of the State of Florida. Marlyn Body Scrub & Spa, Inc. a corporation organizing under the laws of the State of Florida, with its principal office located at 9175 SW 147<sup>th</sup> Avenue, Suite 3216, Miami, Florida 33131 has named Onelia M. Duran, whose address is 9175 SW 147<sup>th</sup> Avenue, Suite 3216, Miami Florida 33196, as its Agent to accept service of process within this State.

ACCEPTANCE:

I agree as Registered Agent to accept service of process; to keep the office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above designated address) in some conspicuous place in the office as required by law.

Registered Agent:




STATE OF FLORIDA  
COUNTY OF

BEFORE ME, the undersigned authority, this day personally appeared Onelia M. Duran, who, after being duly sworn, deposes and says that the facts and matters contained above are true and correct, and that he has executed the same for the purposes expressed herein.

WITNESS my hand and official seal this 14<sup>th</sup> day of April, 2000.

(SEAL)

Notary Public  
State of Florida  
My Commission Expires April 17, 2001  
 Barrington G. Coombs  
MY COMMISSION # CC639337 EXPIRES  
BONDED THRU TROY FAIR INSURANCE, INC.

[3001]

FILED  
00 APR 19 PM 2:19  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE