

TRANSMITTAL LETTER
P000000078384

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

SUBJECT: LAUREN, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600003340326--6
-07/31/00--01038--001
*****87.50 *****87.50

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: RICK FERNANDEZ
Name (Printed or typed)

8004 NW 154 ST. #175
Address

MIAMI LAKES, FL 33016
City, State & Zip

305-389-2513
Daytime Telephone number

00 AUG 18 PM 1:16
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

W-17839
W-19167
JF 8/2



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 10, 2000

RICK FERNANDEZ
8004 NW 154ST, #175
MIAMI LAKES, FL 33016

SUBJECT: LAUREN, INCORPORATED
Ref. Number: W00000019839

We have received your document for LAUREN, INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6878.

Alan Crum
Document Specialist

Letter Number: 700A00043351

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

MEDIEVAL SPAS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8004 NW 154 ST. #175
MIAMI, FL. 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NAIL AND HAIR SALON (BEAUTY SERVICES)

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

RICK FERNANDEZ
8004 NW 154 ST. #175, MIAMI LAKES, FL. 33016

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

RICK FERNANDEZ
8004 NW 154 ST. #175, MIAMI LAKES, FL. 33016

ARTICLE VII INCORPORATOR

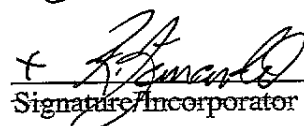
The name and address of the Incorporator is:

RICK FERNANDEZ
8004 NW 154 ST. #175, MIAMI LAKES, FL. 33016

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent

7-21-00
Date


Signature/Incorporator

7-21-00
Date

FILED
00 AUG 18 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA