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TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

200003400522--1
-09/21/00--01051--024
*****78.75 *****78.75

OFFICE USE ONLY

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

1. RENEWAL SKIN CARE S.J. BONILLA MD CORP
(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

NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

FILED
00 SEP 21 PM 12:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

RECEIVED
00 SEP 21 AM 11:25
DIVISION OF CORPORATION
6004-49913
9/21
Examiner's Initials

ARTICLES OF INCORPORATION
OF

RENEWAL SKIN CARE S. J. BONILLA MD CORP

FILED
00 SEP 21 PM 12:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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 by:

Renewal Skin Care S.J. Bonilla MD Corp

ARTICLE II PRINCIPAL OFFICE

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

*8370 West Flagler St
Suite 232
Miami, Fl 33144*

ARTICLE III CAPITAL STOCK

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

350 share, USD 100.00 per share	usd 35,000.00
75 Share Sergio Bonilla	usd 7,500.00
75 share Norman Uriarte	usd 7,500.00
75 share Norma Uriarte	usd 7,500.00
75 share Rina Bonilla	usd 7,500.00
40 share Silvia Godoy	usd 4,000.00
10 share Claudia Valladares	usd 1,000.00

ARTICLE IV REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

*Sergio Bonilla
8370 West Flagler st
Suite 232
Miami, Fl 33144*

ARTICLE V INCORPORATOR(S)

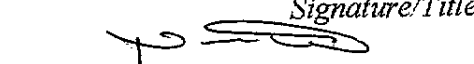
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

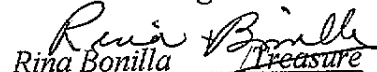
<i>Sergio Bonilla</i>	<i>Norman Uriarte</i>	<i>Norma Uriarte</i>
<i>18180 S.W. 83 Ct</i>	<i>15081 S.W. 69 St</i>	<i>909 N.W. 106 Ave. Cir.</i>
<i>Miami, Fl 33157</i>	<i>Miami, Fl 33193</i>	<i>Miami Fl, 33174</i>

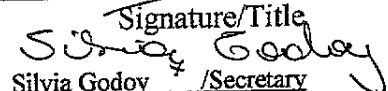
<i>Rina Bonilla</i>	<i>Silvia Godoy</i>	<i>Claudia Valladares</i>
<i>18180 S.W. 83 Ct</i>	<i>14219 S.W. 100Ln</i>	<i>7003 S.W. 63 Ave.</i>
<i>Miami Fl, 33157</i>	<i>Miami Fl, 33186</i>	<i>Miami Fl 33143</i>

*The undersigned has (have) executed these Articles of Incorporation this
11th day of September 2000*

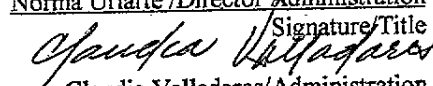

Sergio Bonilla /PRESIDENT
Signature/Title


Norman Uriarte /VICEPRESIDENT
Signature/Title


Rina Bonilla /Treasurer
Signature/Title


Silvia Godoy /Secretary
Signature/Title


Norma Uriarte /Director Administration
Signature/Title


Claudia Valladares /Administration
Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statute, 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:

Renewal Skin Care S.J. Bonilla MD Corp

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

Sergio Bonilla

8370 West Flagler St Suite 232
(P.O. BOX NOT ACCEPTABLE)

Miami, FL, 33144
(CITY/STATE/ZIP)

SIGNATURE: _____

TITLE. President

DATE. 9/14/00

FILED
005 SEP 21 AM 12:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Having been named to accept service of process for the above stated Corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of section 607.325, Florida Statutes.

SIGNATURE _____

DATE. 9/14/00