P000009712460

Department of State Division of Corporations P.O Box 6327 Tallahassee, FI 32314 100003424301--3 -10/13/00--01049--014 *****78.75 ******78.75

SUBJECT: MICHAEL'S HAIR REPLACEMENT FOR MEN AND WOMEN, INC.

Enclosed is an original and one (1) copy of the Articles of Incorporation and check for \$78.75, filing fee and certificate.

FROM:

MARIETTA CIOFFI

21301 Powerline Road, Suite 105 Boca Raton, Florida 33433

(561) 477-3737

DIVISION OF CORPORATIONS
OF OCT 13 PM 3: 56

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ARTICLES OF INCORPORATION

MICHAEL'S HAIR REPLACEMENT FOR MEN AND WOMEN, INC. 00 0CT 13 PM 3: 56

ARTICLE I

The name of the corporation is:

Michael's Hair Replacement for Men and Women, Inc.

ARTICLE II

The address of the principal office of the corporation is:

21301 Powerline Road, Suite 105, Boca Raton, Florida 33433

ARTICLE III

The corporation is authorized to issue one hundred (100) shares of common stock.

ARTICLE IV

The street address of the corporation's initial registered office is:

21301 Powerline Road, Suite 105, Boca Raton, Florida 33433

ARTICLE V

The registered agent upon whom process may be served is:

Marietta Cioffi

ARTICLE VI

Marietta Cioffi of 21301 Powerline Road, Boca Raton, Florida 33133 is an initial incorporator and President of the Corporation

These Articles of Incorporation submitted to the Florida Department of State fro filing this of October, 2000.

Marietta Cioffi

Incorporator and President

MICHAEL'S HAIR REPLACEMENT

FOR MEN AND WOMEN, INC.

I accept designation as resident agent

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

00 OCT 13 PM 3: 56

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:

MICHAEL'S HAIR REPLACEMENT FOR MEN AND WOMEN, INC.

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

MARIETTA CIOFFI 21301 Powerline Road, Suite 105 Boca Raton, Florida 33433

Having been named as registered agent and to accept service of process of 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)