(SAMPLE LETTER OF	
Florida Department of State Division of Corporations P.O. Box 6327	
Tallahassee, FL 32314	100003461821 -11/13/0001128018 *****78.75 ******78.
Re: <u>Aesthetic World &</u> (Name of C	Spa Center , Inc. orporation)
Gentlemen:	
Enclosed please find the original and one copy of the A check in the amount of \$78.75	rticles of Incorporation, together with my
This represents the cost of the Filing Fees, Certified Co Registered Agent Designation for the above named cor	opy of Articles of Incorporation and Fee for poration.
Very trul	y yours.
	Marlon Keith Lara (Individual's Name)
	Aesthétic World & Spa Center (Name of Corporation)
	- MAILING ADDRESS OF CORPORATION —
	Aesthetic World & Spa Center , Inc.
	2100 West 68 Street
(ialeah F1 PHONE 33016 305) 231-0969 ea Code Number Ext.

Area Code

Number

ARTICLES OF INCORPORATION

of

Aesthetic Wor	1d & S	pa Center , Inc.		<u> </u>
·	ne of corp			- />
The undersigned acting as the incorporators of a cor he following articles of incorporation for such corporation	poration on:	under the Florida Business Co		
ARTICLE		PORATE NAME	OF CALLS	TO PA SE SO
The name of the corporation is:	r1d & S	pa Center , Inc		13 C
Aesthetic wo	TIG & D	pa ochos ,		100 M
		OURATION		ORIGINA ORIGINAL ORIGINA ORIGINA ORIGINAL ORIGINA ORIGINA ORIGINAL ORIGINA ORIGINA ORIGINA ORIGINA ORIGINA ORIG
This corporation shall exist perpetually unless disso	olved acco	ording to Florida law.		
		PURPOSE		
- '			mitted under t	he laws of the
The corporation is organized for the purpose of eng United States and the State of Florida.	gaging in	any activities of business peri		
ARTICL	E IV - CA	APITAL STOCK		
The corporation is authorized to issue500	shares of	common stock, par value \$ _	1.00	per share.
ARTICLE V - The street address of the initial principal office and	<i>INITIAL</i> d, if differ	PRINCIPAL OFFICE rent, the mailing address is:		
STREET ADDRESS				
2100 West	68_	Street		
CITY Hialeah		FLÖRIDA	ZIP	33016
Mailing address, if different				
STREET ADDRESS			<u></u>	- <u></u>
				-
CITY		FLORIDA	ZIP	
ARTICLE VI - INITIA		TERED OFFICE AND AG		•
The street address of the initial registered off	ice and t	he name of the initial regis	tered agent a	t the office is:
NAME Marlon Keith Lara				
ADDRESS				
ADDRESS 2100 West 68 Street		FLORIDA	ZIP	33016

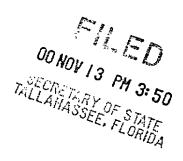
Hialeah

CITY

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have(Laws, but shall never be less than	n one (1). The names and
NAME Rosario Caridad Lopez		
ADDRESS 7464 North West 169 Terrace		
CITY Miami	STATE F1.	ZIP 33015
NAME Marlon Keith Lara		
ADDRESS 2295 South West 64 Avenue		
CITY Miami	STATE F1.	ZIP 33155
NAME		_
ADDRESS		
CITY	STATE	ZIP
ARTICLE VI	II - INCORPORATORS	
The names and addresses of the incorporators signing thes	e Articles of Incorporation are as	follows:
NAME Provide Confided Longs		
ADDDESS		
CITY Miami	STATE	ZIP 33015
NAME Marlon Keith Lara		
ADDRESS		
CITY Miami	STATE F1.	ZIP 33155
NAME		
ADDRESS		
CITY	STATE	ZIP
The undersigned incorporator(s) have executed these	Articles of Incorporation this	8th
day of November	, 19 - 2000	ens de la companya d
	pamed OC	Africa (Signature)
	Martinara	(Signature)
		(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



	to the Maria S Spe Contor Tro		
Aesthetic World & Spa Center , Inc. (name of corporation)			
	· · · · · · · · · · · · · · · · · · ·		
	·		
	1 con orol the following is submitted:		
Pursuant to Flori	da Statutes Sections 48.091 and 607.0501, the following is submitted:		
The above corpo	oration, organized under the laws of the State of Florida with its registered office		
as indicated in th	ne Articles of Incorporation		
at	2100 west 68 Street		
	Hialeab , Fl. 33016		
	Marlon Keith Lara		
located at the af	oresaid address, as its registered agent to accept service of process within this		
state.			
Having been na	med as registered agent and to accept service of process for the above stated		
Having been no	he place designated in this certificate, I hereby accept the appointment as regis-		
corporation at t	the place designated in this contribute, 1 forther agree to comply with the provisions of all		
tered agent and	agree to act in this capacity. I further agree to comply with the provisions of all		
statutes relating	g to the proper and complete performance of my duties, and I am familiar with		

November 8, 2000
(Signature)

(Date)

and accept the obligations of my position as registered agent.