TRANSMITTAL LETTER 09492 Department of State

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

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Lerp SUBJECT: ness **CORPORATE NAME Γ**INCLUDE SUFFIX)

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800003474598---6 -11/22/00--01067--017 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

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

□ \$70.00 Filing Fee	ST8.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	31 TROPH	ISHEED inted or typed) -Y LANE		DO NOV 22	
	<u> </u>	didress <u>et F2</u> 34 State & Zip <u>746 - 056</u> Elephone number	ASSEE, FLORIDA	AH 8	FILED

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

## 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: INNERVISION Beauty & Wellness Corp FILED ARTICLE II PRINCIPAL OFFICE NH 8: The principal place of business/mailing address is: PO BOK 22152 LALE BUENA VISTA, FZ 32830 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To engage in Any LAWFUL Activity For Which the LAW STATES in FLORIDA, will Be dealer servicing women omen wellness ARTICLE IV SHARES ARTICLE IV SHARES The number of shares of stock is: ente common stoche 10,000.00 ARTICLE V INITIAL OFFICERS (DIRECTORS (optional) The name(s) and address(es):

NA

ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:

Ms. NANCY Flesher 229 ALMA ST. Kissimmer 12 3474/ RTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CAROL RASHEDD 31 TROPHY LANE 1635; mmee Z 36759

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

A DO KIN

//-/5-00 .te Date

11-15-00

Signature/Incorporator

Date