(Requestor's Nam 3320 S.W. 87 AVEN	o)	<u>S SERVICE</u>		·	
(Address) MÍAMI, FLORIDA (30	5)552-5973				
(City, State, Zip)					
ESA ROMAN (TALLAH	ASSEE REPE	RESENTATIVE)	OFFICE USE ON	LY	
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NEW FILINGS Profit NonProfit Limited Liability Domestication Other		AMENDMI Amendment Resignation of R Change of Regist Dissolution/Witho	.A., Officer/Directo ered Agent	TALLAHASSEE FLORIDA	OO NOV 29 PH 1: OU
Annual Report Fictitious Name Name Reservation		REGISTRATIO QUALIFICATIO Foreign Limited Partners Reinstatement Trademark Other	V /	,2 }8 a1 a	

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby ad the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

Kind Feel, Inc.

<u> ARTICLE II – PRINCIPAL OFFICE</u>

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

1821 Jefferson Avenue, #104 Miami Beach, Fl 33139

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Conchita Fernandez 1821 Jefferson Avenue, #104 Miami Beach, Fl 33139

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

> Conchita Fernandez (F, VP, Sec, Treas) 1821 Jefferson Avenue.

Miami Beach, FI 33139

The undersigned incorporator has executed these Articles of Incorporation this _____ day of ______ 2000

ARTICLE VI- DIRECTOR(S)

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

ES.MA, SrL Elena Esposito, President Via Eossolo 48/9B 40139 Bologno (BO) Italy

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature