# P01000017578

### Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : BERRIZ & GIRALDO P.A.

Account Number : 119990000017 Phone : (305)485-9300 Fax Number : (305)485-1098

### FLORIDA PROFIT CORPORATION OR P.A.

CENTRO DE SALUD Y BELLEZA, INC.

Certificate of Status	0
Certified Copy	I.
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OTFEB 15 MHO: 06
SECRETARY OF STATE
TALLAHASSI F. FLORIDA

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### ARTICLES OF INCORPORATION

OF

### CENTRO DE SALUD Y BELLEZA, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the state of Florida.

### ARTICLE I

The name of this corporation shall be:

CENTRO DE SALUD Y BELLEZA, INC.

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SECRETARY OF STATE
TAN LANASSIE, FLORIDA

#### ARTICLE II

This corporation shall commence existence upon the filling of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

#### ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business,
- (2) Said corporation shall further have powers:
- To have perpetual succession by its corporate

Name:

CENTRO DE SALUD Y BELLEZA, INC.

NOTA O GITATOLO

4080 SU 84 CICC

HIGMI, FI 33155

(305) 485 9300

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### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$ 10.00

Unless otherwise stated in these articles or an amendment to these articles, there shall be only one (1) class of stock of this corporation.

### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

NELSON TREVEJO 7940 W DR#7 NORTH BAY VILLAGE MIAMI, FL. 33141

The principal office shall be:

7940 W DR # 7 NORTH BAY VILLAGE MIAMI, FL. 33141

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### **ARTICLE VI**

The initial Board of Directors shall consist of a total of TWO (2) person, and the name and address of the person who is to serve as an initial director is:

NELSON TREVEJO 7940 W DR # 7 NORTH BAY VILLAGE MIAMI, FL. 33141

GLADYS TREVEJO 7940 W DR # 7 NORTH BAY VILLAGE MIAMI, FL. 33141 PRESIDENT

VICEPRESIDENT

The name and address of the incorporator executing these articles of incorporation

### NELSON TREVEJO 7940 W DR # 7 NORTH BAY VILLAGE MIAMI, FL. 33141

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these articles of incorporation this 14 days of FEBRUARY, 2001

NELSØN TREVEJO

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### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, 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

CENTRO DE SALUD Y BELLEZA, INC.

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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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

### NELSON TREVEJO 7940 W DR # 7 NORTH BAY VILLAGE MIAMI, FL. 33141

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR 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 AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. ANN I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE X

Dated: FÉBRŰARY 14, 2001

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