TRANSMITTAL LETTER PO100037060 Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$87.50 \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Xuan

Address

Tallahassee, FL. 32308

City, State & Zip

850-868-1012

Daytime Telephone number

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

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		:- ··· <u>-</u>
ARTICLE I NAME The name of the corporation shall be:	·	·
Xuan Hi-Lites, INC.	م هويد د ساد ساد سدد	g en sa
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2711-F Killearney Way Tallahassee, FL. 32303. ARTICLE III PURPOSE	ASSI	APPROVEI
The purpose for which the corporation is organized is: Hair, Nail, Tanning Salon	FLORIDA	VED B 10: 20
ARTICLE IV SHARES The number of shares of stock is:	<u> </u>	
Tallahassee, Pl. 32308	<u>onal)</u>	+ + + + + + + + + + + + + + + + + + +
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	1 77 d a 1	
XUAN T. O WIES 6689 Pickwick Rood Tallahassee, Fl. 32308		· · · · · · · · · · · · · · · ·
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: XUAN T. DWIES		
2711-F Killearney Way. Tallahassee, Fl. 32308	*********	
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent as	ove stated corporation at the place desig	
Signature/Registered Agent	4 /12/01 Date	_
Signature/Incorporator	<u>4 /2/0/</u> Date	