

P01000052382

Date: May 10, 2001

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

200004273312--9  
-05/21/01--01095--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Subject: *PERMANENT MAKE-UP ARTISTRY BY KARIN, INC*

I enclosed the original copy of the Articles of Incorporation for the above captioned corporation and a check in the amount of \$70.00.

Sincerely,

*Karin Leone*  
Karin Leone

From: Karin Leone  
84 SE Ontario Way  
Stuart, FL 34997  
Tel #561-283-6435

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01 MAY 21 AM 12:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

F. CHESSE

MAY 25 2001

ARTICLES OF INCORPORATION  
OF  
PERMANENT MAKE-UP ARTISTRY BY KARIN, INC

ARTICLE I NAME

The name of the corporation shall be:

PERMANENT MAKE-UP ARTISTRY BY KARIN, INC

ARTICLE II PRINCIPAL OFFICE

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

84 SE Ontario Way  
Stuart, FL 34997

ARTICLE III CAPITAL STOCK

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

1,000 Shares

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

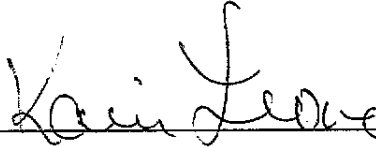
Karin Leone  
84 SE Ontario Way  
Stuart, FL 34997

ARTICLE V INCORPORATOR

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

Karin Leone  
84 SE Ontario Way  
Stuart, FL 34997

The undersigned has executed these Articles of Incorporation this 10 th day of May, 2001.

  
\_\_\_\_\_

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501,  
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:

PERMANENT MAKE-UP ARTISTRY BY KARIN, INC

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

Karin Leone  
84 SE Ontario Way  
Stuart, FL 34997

Signature: \_\_\_\_\_

*Karin Leone*

Title: President  
Date: 5/10/01

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TALLAHASSEE, FLORIDA

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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 AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING  
TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH  
AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature: \_\_\_\_\_

*Karin Leone*

Date: 5/10/01