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TRANSMITTAL LETTER

IT AUG 27 PM 3: 11
SECRETARY OF STATE
ALLAHASSEE FLORIDA

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

900004558739--2 -08/28/81--01007--009 ****131.25 *****87.50

SUBJECT: MAIL'S BY ORETTA INC.

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$122.50 \$78.75 \$70.00 Filing Fee Filing Fee Filing Fee Certified Copy & Certificate & Certified Copy & Certificate Additional Copy Required FROM: 56/- 330- 6305 Daytime Telephone number

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

FILED

ARTICLES OF INCORPORATION

O1 AUG 27 PH 3: 11
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

ARTICLEI NAME

The name of the corporation shall be:

NAIL'S BY LORETTA INC

ARTICLE II PRINCIPAL OFFICE

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

272/ ZURNO WAY. DELRAY BEACH, FLORIDA, 33445

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

2721 ZORNO WAY. DELRAY BEACH, FLORIDA, 33445

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

LORETTA-MARITE GABAY 2721 ZORNO WAY DELPAY BEACH, FL 33445

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

day of August ,#2001.

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE 27 PM 3: 11

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:	NAil'S BY LORETTA INC
2. The name and address of the reg	istered agent and office is: A. MARITE GABAY. (NAME)
7721 (P.O. E	ZORNO INAY BOX OF Mail Drop Box NOT ACCEPTABLE) (CITY/STATE/2IP)

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.

X John (SIGNATURE) 8/22/2001
(DATE)