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FILED

TRANSMITTAL LETTER

01 OCT 29 PM 5:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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-10/29/01--01054--019
*****78.75 *****78.75

SUBJECT: IGIA, Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

~~XXXXX~~ ☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: IGIA, Inc.

Name (Printed or type)

9939 4th St N

Address

St Pete., FL 33702

City, State & Zip

(727)- 570-4500

Daytime Telephone number

C. BLALOCK OCT 30 2001

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

IGIA , Inc.

ARTICLE II PRINCIPAL OFFICE

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

9939 4th St N
St Pete., Fl 33702

ARTICLE III SHARES

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

1,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Spyridon Gogas
7820 4th Avenue S
St Pete., Fl 33707

ARTICLE V INCORPORATOR

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

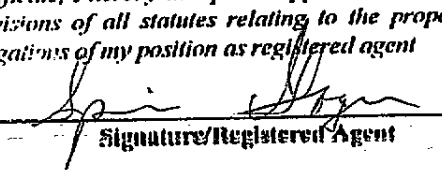
Spyridon Gogas
7820 4th Ave S
St Pete., Fl 33707
065-54-3902


Signature/Incorporator

10-25-01
Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

10-25-01
Date