PO/OOO/15963

Department of State	2000047058928 -12/05/0101048003
Division of Corporations	*****78.75 ******78.75
P.O. Box 6327	
Tallahassee, FL 32314	
SUBJECT: IMPRÉSSIONS OF WA	THAIM DEACH (NC.
(Proposed corpor	rate name)
Enclosed is an original and one (1) copy of the	articles of incorporation and a check for
<u> </u>	
,	
Del 1	
FROM: TEVEN LEVY	
Name (printed o	or typed)
180/ VALM SE	ACH LAKE BUD,
1.\ Addres	
WEST PALM D	EACH, TL. 3340/
City, State,	& Zip ALL
(561)689-253	
Telephone N	umber SS
	M 9: 47 SEE FLORIE
	ALL T
	y

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

g/13/7

ARTICLES OF INCORPORATION

OF

AMBRESSIONS OF WEST PAIN BEACH TUC.

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.

ARTICLE 1 NAME

The name of the corporation shall be: IMPRESSIONS OF WEST HEADER TVC.

ARTICLE II PRINCIPAL OFFICE

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

1801 VALM BEACH LAKE BLOD WEST PALM BEACH, FL. 33401

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: / O SHARES (No PAR (ALUE)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

STÉVEN LEVY 1801 PARM BEACH LAKE BLUD. WEST PARM BEACH, FL. 33401

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorpora-

tion is(are):

Steven LEVY, PRESIDENT, SECTY-TREAS, DIRECT	TOR
PRIC LICARE	
hEON HAMAN, VICE-PRESIDENT, DIRECTOR	<i>F</i>
1801 PAIN BEACH LAKE BLUD WEST PAIN BEACH, FL 33401	,
1801 PAIM DEACH KAKE BLUD	
WEST PACM BEACH, TZ, 33401	
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this	
day of NOVEMBER 192001.	
Stern In	". I •
Signature Lun Hagar	
Signature	

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions 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: IMPRESSIONS OF WAT VALM BEACH INC.
2.	The name and address of the registered agent and office is:
	1801 PALM SEALH LAKE BLUDGE S
	P.O. Box NOT) acceptable) Wast Alm Defects, FL. 3340/ FS. (City/State/Zip)
	(City/State/Zip)

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.

DATE

REGISTERED AGENT FILING FEE: \$35.00