

OFFICE USE ONLY (DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. LAKSHMI AROMATHERAPY SPA & SALON
(Corporation Name) (Document #) INC.
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #) 600005289506--1
-04/17/02--01044--015
*****78.75 *****78.75
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/QUALIFICATION | |
|-------------------------------------|---------------------|
| <input checked="" type="checkbox"/> | Foreign |
| <input checked="" type="checkbox"/> | Limited Partnership |
| <input checked="" type="checkbox"/> | Reinstatement |
| <input checked="" type="checkbox"/> | Trademark |
| <input checked="" type="checkbox"/> | Other |

RECEIVED
02 APR 17 AM 10:31
FILED
02 APR 17 PM 1:00
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Examiner's Initials

ARTICLES OF INCORPORATION

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

FILED
02 APR 17 PM 1:00
TALLAHASSEE
SECRETARY OF STATE
FLORIDA

ARTICLE I - NAME

The name of the corporation shall be:

LAKshmi Aromatherapy Spa & Salon inc.

ARTICLE II - PRINCIPAL OFFICE

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

2755 S.W. 27 ave
Coconut Grove Fl. 33133

ARTICLE III - SHARES

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

100

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Leonor Garcia

2755 SW 27 ave
Coconut Grove Fl. 33133

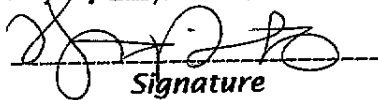
ARTICLE V - INCORPORATOR

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

LEONOR GARCIA
1800 SW 175T
MIAMI FL 33145

Yvette Prieto
465 Ocean Dr #1005
Miami FL 33139

The undersigned incorporator has executed these Articles of Incorporation this 19 day of April 2022


Signature

Signature

ARTICLE VI- DIRECTOR(S)

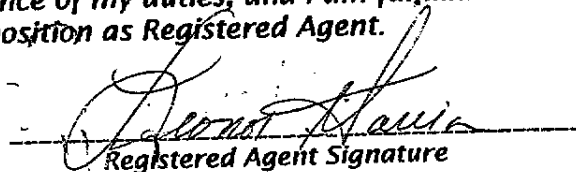
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

Yvette Prieto (President)
465 Ocean Dr. #1005
Miami FL 33139

LEONOR GARCIA (President)
1800 SW 175T
MIAMI FL 33145

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.


Registered Agent Signature

02 APR 17 PM 1:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED