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TRANSMITTAL LETTER

FILED

02 APR 19 AM 10:32

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

SUBJECT: THE ANGELS SKIN CARE 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

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Carlos E. Velasquez
Name (Printed or typed)

14291 S.W. 38th St.
Address

Miami, Fl. 33175
City, State & Zip

305-226-2248
Daytime Telephone number

100005308951--1

-04/19/02--01062--014
*****78.75 *****78.75

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

WHITE APR 25 2002

ARTICLES OF INCORPORATION

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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.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

THE ANGELS SKIN CARE INC.

ARTICLE II PRINCIPAL OFFICE

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

12530 S.W. 8th St.
Miami, Fl. 33184

ARTICLE III SHARES

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

100 One Hundred

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Hector Aponte
19130 Bobo Link Drive
Miami, Fl. 33015

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):

Hector Aponte - President

19130 Bobo Link Drive
Miami, Fl. 33015

Alvaro D. Gonzalez - Secretary

1201 S.W. 139th Place
Miami, Fl. 33184

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

16th day of April, 2001

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

Hector M Aponte
Signature

Alvaro D Gonzalez
Signature

Signature

Notarization is not required

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**CERTIFICATE OF DESIGNATION OF
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 THE ANGELS SKIN CARE INC.

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

Hector Aponte

(NAME)

19130 Bobo Link Drive

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Miami, Fl. 33015

(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.

Hector M. Aponte
(SIGNATURE)

04-16-01

(DATE)