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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

KARUNA COSMETIC CENTER, INC.

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Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75
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ARTICLES OF INCORPORATION

OF.

Karuna Cosmetic Center, Inc.

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

ARTICLE I NAME

The name of the corporation shall be:
Karuna Cosmetic Center, Inc.
The principal place of business of this corporation shall be:
3986 W. 16th Avenue, Hialeah, FL 33012

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

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

1000 shares, common stock, \$1.00 par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

NAME Aristides C. Martinez, MD

TITLE

Pres., V.P., Treas., Sec.

ADDRESS

8261 N.W. 165th Terr Miami Lakes, FL 33016

ARTICLE VI INCORPORATORS

The name(s) and street address(s) of the incorporator(s) to this articles of incorporation is (are)

NAME

Aristides C. Martinez, MID

<u>ADDRESS</u>

8261 N.W. 165th Terr.E. Miami Lakes, FL 33016

IN WITNESS WHERE OF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 30th day of August, 2002.

Signature(s) of incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT\REGISTERED OFFICE

RECRETARY OF STATE ARLLANDASSEE, FLORIDA

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organizes 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: Karuna Cosmetic Center, Inc.

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

ARISTIDESC Martinez, MD 3986 W. 16th Avenue, Hialcah, Fl. 33012

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Date 5-30-02.

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 the statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.