P02000100030 Ferm 1

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

300007765313--4 -09/16/02--01039--005 ****122.50 ******78.75

SUBJECT:

CONALEX Hair Salon 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

\$78.75

Filing Fee

Filing Fee

& Certificate

\$122.50

Filing Fee

& Certified Copy

\$131.25

Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Consuelo Alcarraz & Sixto Alejandro Alcarraz

Name (Printed of typed)

608 Gerald Ave #213

Address

Le High Acres, Florida 33972

City, State & Zip

(239) 357-3810 or (239) 303- 8589

Daytime Telephone number

2002 SEP 16 AN 8:5

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

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ARTICLES OF INCORPORATION

1. The name of the corporation shall be: <u>CONALEX Hair Salon Inc.</u>		
2. The principal place of business and mailing address of the corporation is:		
3. The corporation shall have the authority to issue shares of stoc	.k.	
4. The registered agent of the corporation is <u>Sixto A. Alcarraz</u> registered street address is <u>3940 Metro Parkway Ft. Myers</u> , Florida 33916 Florida <u>33916</u> .	and the	
5. The initial Board of Directors shall have 2 member(s) whose name(s) and addr is/are as follows: Consuelo Alcarraz 608 Gerald Ave. #213 Lehigh Acres, Florida Sixto Alejandro Alcarraz 608 Gerald Ave. #213 Lehigh Acres, Florida 33972	da 33972	
The number of directors may be raised or lowered by amendment of the bylaws corporation but shall in no case be less than one.	of the	
6. The incorporator of this corporation is <u>Sixto A. Alcarraz</u> street address is <u>608 Gerald Ave #213 Lehigh Acres, Florida 33972</u>	whose	
Dated09/12/2002	SEP 16 AN 8-1	
Incorporator	<u>S</u>	,

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 am familiar with and accept the obligations of my position as registered agent.

Dated 09/12/2002

Registered Agent