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TRANSMITTAL LETTER

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

500008284055----10/09/02--01036--012 *****78.75 ******78.75

SUBJECT: Lakay-Monica & Associates Full Service Day Spa, Inc. (Proposed corporate name-must include suffix)

Enclosed is an original and \underline{one} (1) \underline{copy} of the articles of incorporation and a check or money order for:

From: Monica Barrow

12000 NW 7th Avenue
Address

Miami, FL 33168
City, State, Zip

(305) 688-8900
Daytime Telephone Number

10-10-03

ARTICLES OF INCORPORATION

9,

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

ARTICLE I - NAME

The name of the corporation shall be:

Lakay-Monica & Associates Full Service Day Spa, Inc.

12 OCT -9 M 10: 16

ARTICLE II PRINCIPAL OFFICE

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

12000 NW 7th Avenue Miami, FL 33168

ARTICLE III - SHARES

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

The maximum number of shares that this corporation is authorized to have outstanding at any time is SEVEN THOUSAND FIVE HUNDRED (7,500) of common stock, each share having the par value of ONE DOLLAR (\$1.00).

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Monica Barrow 3616 SW 70th Avenue Miramar, FL 33023

ARTICLE V - INCORPORATORS(S) See instructions for officers/directors

Treasurer

The names(s) and street address of the incorporators is (are):

Vice President

President

Monica Barrow	Lakay Flax	Donna Prince	
3616 SW 70 th Avenue	7030 NW 179 th St. #104	1487 NW 101 Street	
Miramar, FL 33023	Hialeah, FL 33015	Miami, FL 33147	

The undersigned incorporator(s) has (have) executed these articles of incorporation this

1st day of October , 2002.

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

Signature Sorrow

Signature

Signature

Signature

Notarization is not required

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

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF 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 corporation is:

Lakay-Monica & Associates Full Service Day Spa, Inc.

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

Monica Barrow 3616 SW 70th Avenue Miramar, FL 33023

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)