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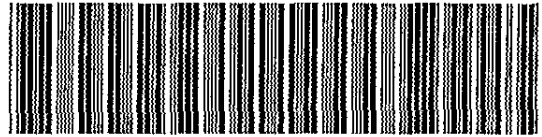
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: The Magic Touch of Boca Raton, 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 of Status
x

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Jose D. Laverde, CPA
Name (Printed or typed)

3347 NE 32nd Street
Address

Fort Lauderdale, FL 33308
City, State & Zip

954 563 7916

Daytime Telephone number

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

ARTICLES OF INCORPORATION
OF
THE MAGIC TOUCH OF BOCA RATON, INC.

The undersigned incorporator hereby adopts these Articles of Incorporation for the formation of a corporation under Florida General Corporation Act.

ARTICLE I

NAME

The name of the corporation is The Magic Touch of Boca Raton, Inc.

ARTICLE II

DURATION

The duration of the corporation shall be perpetual.

ARTICLE III

INCORPORATION

The existence of the corporation shall commence as of the time of the filing of these Articles of Incorporation with the Secretary of the State of Florida.

ARTICLE IV

PURPOSES

The general purpose for which the corporation is initially organized is:

1. To engage in such lawful business for which corporations may be incorporated under the Florida General Corporation Act.

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ARTICLE V
AUTHORIZED SHARES

The aggregate number of authorized shares of stock that this corporation is authorized to have outstanding at any one time is one hundred shares of common stock each having no par value.

ARTICLE VI
INDEMNIFICATION OF DIRECTORS,
OFFICERS AND OTHER AUTHORIZED REPRESENTATIVES

Section 1. The corporation shall indemnify its officers, Directors, employees and agents against liabilities, damages, settlements and expenses (including attorneys' fees) incurred in connection with the Corporation's affairs, and shall advance such expenses to any such officers, directors, employees, to the full extent permitted by law, and as more particularly set forth in the Corporation's Bylaws. Such indemnification provisions of the Corporation's Bylaws may be enacted and modified from time to time by resolution of the Corporation's Board of Directors.

Section 2. Any repeal or modification of any provision of this article by the shareholders of the Corporation shall not adversely affect any right to protection of a Director, officer, employee or agent of the Corporation existing at the time of the such repeal or modification.

Section 3. Indemnification hereunder and under the bylaws shall be a personal right and the Corporation shall have no liability under this Article to any insurer or any person, corporation, partnership, association, trust or other entity (other than the heirs, executors or administrators of such person) by reason of subrogation, assignment or succession by any other means to the claim of any person to indemnification hereunder or under the Corporation's Bylaws.

ARTICLE VII
REGISTERED OFFICE AND AGENT

The initial street address of the registered office of this corporation in the State of Florida is: 11029 Harbour Springs Circle, Boca Raton, FL 33428.

The name of the initial registered agent at such address is Alejandro Sandoval.

ARTICLE VIII
INITIAL BOARD OF DIRECTORS

The initial Board of Directors shall consist of two members.
The initial Directors and their addresses are:

<u>NAME</u>	<u>ADDRESS</u>
Alejandro Sandoval, Chairman	11029 Harbour Springs Circle Boca Raton, FL 33428.
Olga Sandoval, Director	11029 Harbour Springs Circle Boca Raton, FL 33428.

ARTICLE IX
INCORPORATOR

The name and address of the incorporator is:

<u>NAME</u>	<u>ADDRESS</u>
Jose D. Laverde	3347 NE 32 nd Street Suite A Fort Lauderdale, FL 33308

ARTICLE X
MAILING ADDRESS

The initial mailing address of the Corporation shall be:

11029 Harbour Springs Circle
Boca Raton, FL 33428

IN WITNESS WHEREOF, the undersigned has executed this Articles of Incorporation
this February 28, 2003.


Jose D. Laverde, CPA

The Magic Touch of Boca Raton, Inc.
CERTIFICATE OF DESIGNATION

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 Magic Touch of Boca Raton, Inc.
2. The name and address of the Registered Agent and office is:

Alejandro Sandoval
11029 Harbour Springs Circle
Boca Raton, FL 33428

Signature: _____

Alejandro Sandoval, President

Date: February 28, 2003

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TALLAHASSEE, FLORIDA

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: _____

Alejandro Sandoval

Date: February 28, 2003