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DIVISION OF CORPORATION

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03 #57 - 5 - 5115: 54

E. CHEGGER MAY M. . 1

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(Corporation Name) Walk in Pick up time 2.86 Mail out Will wait Photocopy	(Document #) Certified Copy Certificate of Status
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OTHER FILNGS Annual Report Fictitious Name Name Reservation Reinstatement Trademark Other	

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ARTICLES OF INCORPORATION

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.

ARTICLE I - NAME

The name of the corporation shall be:

Body Works Healing arts Jewelry and Consultants

ARTICLE II - PRINCIPAL OFFICE

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

8591 NW 186 St. Suite 129 Miami Florida 33015

ARTICLE III -SHARES

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

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Carlos Santiago 19203 NW. 86th Ave Miami, Florida 33015

ARTICLE V - INCORPORATOR

The name and s	treet	address	of the	incorporator	to these	Articles	of
Incorporation is	0	f		F N			

Carlos Santiago 19203 NW 86th Ave Mami, Florida 33015

The undersigned incorporator has executed these Articles of Incorporation this 2 day of May 2003

Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

President: Carlos Santiago 19203 NW 86th Are.

miami, Fl. 33015

Vice President: ar lene Krinney 19203 NW 86 M Are Miami, Al. 33015 SECRETARY OF STATE
TALLAHASSEE, FLORID

03/1/14/-5 PH/2: 34

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature