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(Requestor's Name)

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(City/State/Zip/Phone #)

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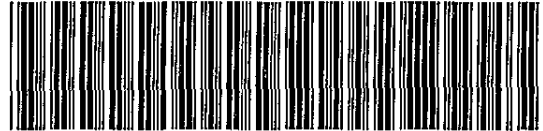
(Business Entity Name)

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TALLAHASSEE, FLORIDA
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TRANSMITTAL LETTER

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

SUBJECT: AMERICAN ASSOCIATION OF ESTHETICIANS, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: LESLIE GARSHOTT
Name (Printed or typed)

210 49TH ST. NORTH
Address

ST. PETERSBURG, FL 33710
City, State & Zip

727-6880957
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

AMERICAN ASSOCIATION OF ESTHETICIANS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

210 49th ST N
ST. PETERSBURG, FL 33710

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROVIDE LICENSE & CME UPDATES FOR EACH INDIVIDUAL MEMBER. SET TESTING STANDARDS FOR ESTHETICIAN SCHOOLS + YEARLY RENEWALS. SEND MONTHLY NEWSLETTER. OFFER 2 YEARLY EDUCATIONAL SEMINARS. OFFER DISCOUNTED RATES FOR PRODUCTS, EQUIPMENT, INSURANCE (HEALTH/LIFE),

ARTICLE IV SHARES

The number of shares of stock is:

200 NPVS = \$1.00 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PRESIDENT: LESLIE GARSHOTT

VICE PRESIDENT: MARIANA KUNZT

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

LESLIE GARSHOTT
210 49th ST. N
ST. PETERSBURG, FL 33710

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LESLIE GARSHOTT
210 49th ST. N
ST. PETERSBURG, FL 33710

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Leslie Garshott

Signature/Registered Agent

6/24/03

Date

Leslie Garshott

Signature/Incorporator

6/24/03

Date

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