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Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : A.A.ALI, CPA
Account Number : I20000000192
Phone : (407)298-3900
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### FLORIDA PROFIT CORPORATION OR P.A.

BEYOND BRAIDS & BARBER BEAUTY SALON, INC.

Certificate of Status	1_1
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9/11/2003

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03 SEP 11 AM 9: 06 SECRETARY (F.S.IA); TALLANASSEE, FLORIGA

# ARTICLES OF INCORPORATION Of BEYOND BRAIDS AND BARBER BEAUTY SALON, INC.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

#### ARTICLE I - CORPORATE NAME

The name of the corporation is:

BEYOND BRAIDS AND BARBER BRAUTY SALON, INC. 5208 LANETTE STREET ORLANDO FL 32811

#### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

#### ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

#### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 1000 shares of (One) Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

#### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agents of this Corporation is:

Name:	ARINTHIA D. DOUGLAS
Address:	5208 LANETTE STREET
City:	ORLANDO FL 32811

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#### ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have (ONE) director initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). The name and address of the initial director(s) of the corporation are as follows:

Name:	ARINTHIA D. DOUGLAS
Address:	5208 LANETTE STREET
City:	ORLANDO, FL 32811

#### ARTICLE VII - INCORPORATORS

The name and address of the person(s) signing these articles of Incorporation are as follows:

Name:	ARINTHIA D. DOUGLAS
Address:	5208 LANETTE STREET
City:	ORLANDO, FL 32811

SEP-11-2003 THU 10:20 ID:A.A.ALI,CPA 407-288-1040

TEL:4072980660

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SEGRLIARY OF STA

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

\*\*\*\*\*\*\*\*\*\*\*\*\*

ARINTHIA D. DOUGLAS/Registered Agent

Date

ARINTHIA D. DOUGLAS/Incorporator

Date