03000/05048

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
opedar maduono to 1 ming officer.

Office Use Only



500023210945

N9/22/03--01033--018 **78.75



00 924

TRANSMITTAL LETTER

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

SUBJECT: Andya 5Kin 3 Body Management, 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 **₩**\$78.75

Filing Fee

& Certified Copy

□ \$87.50

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Orlando Arrom
Name (Printed or typed)

10556 N.W. 26th Street - Suite 203
Address

Miami, FL 33172
City, State & Zip

(305) 592-0663
Daytime Telephone number

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

ARTICLES OF INCORPORATION

OF

AYANA SKIN & BODY MANAGEMENT INC.

FILED

03 SEP 22 AH 3:51

TALLAMASSEE, FLORID

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

AYANA SKIN & BODY MANAGEMENT INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:
- (3) To have perpetual succession by its corporate name;

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of one hundred (100) shares, having an individual par value of one dollar (\$1.00).

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only (1) class of stock of this corporation.

ARTICLE V

The street address of the initial principal office and the name of the initial Resident Agent of this corporation shall be:

INITIAL PRINCIPAL OFFICE

10540 NW 26 STREET Suite G-106 ____ Miami, Fl. 33172 ___

INITIAL RESIDENT AGENT

Orlando Arrom

ARTICLE VI

The initial Board of Directors shall consist of a total of one (1) person, and the name and address of the persons who are to serve as initial directors are:

ISABEL SILVA 11088 NW 47 Lane Miami, Fl. 33178 The name and address of the incorporator executing these Articles of Incorporation is:

ISABEL SILVA 11088 NW 47 Lane Miami, FL 33178

IN WITNESS WHEREOF, the undersigned incorporator has(ve) executed these Articles of Incorporation this 17th day of September, 2003.

STATE OF FLORID

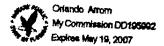
COUNTY OF DADE

BEFORE ME, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared **ISABEL SILVA** known to me and known by me to be the person(s) who executed the foregoing Articles of Incorporation, and she (they) acknowledged before me that she (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in state and county aforesaid, this 17th day of, 2003.

NOTARY PUBLIC, STATE OF FLORIDA

My Commission Expires:



CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 617.0501, 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.	AYANA SKIN & BODY MANAG	EMENT INC.		- 		
2.	The name and address of the registered agent and office is:					
	Orlando Arrom	on god and the same	* **			
	10556 NW 26 Street, Suite D-20	(NAME)	- (*) Pag [*]			
	(P.O. BO	X NOT ACCEP	TABLE)	98 F		
PRODESI REGI AGRI THE FAMI	(CI ING BEEN NAMED AS REGISTE CESS FOR THE ABOVE S IGNATED IN THIS CERTIFICATE ISTERED AGENT AND AGREE EE TO COMPLY WITH THE PRI PROPER AND COMPLETE PI ILIAR WITH AND ACCEPT T ISTERED AGENT.	TATED CORF E, I HEREBY AC TO ACT IN TO OVISIONS OF A ERFORMANCE	AND TO A PORATION CCEPT TH THIS CAP ALL STAT OF MY ONS OF	N AT THE P IE APPOINTMEN ACITY. I FUR TUTES RELATIN DUTIES, AND	LACE IT AS THER G TO I AM	

