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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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OFFICE USE ONLY(DOCUMENT #)				
LAZARUS CORPORATE FII	LING SERVICE			
3320 S.W. 87 AVENUE				
MIAMI, FLORIDA (305)552-5973	,	. "		
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•		OFFICE USE ONLY		
CORPORATION NAME(S) &	BOCHMENT NUM	RER(S) (if known)		
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1. KG RELAXA	110N 400.	M. INC.		
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NEW FILINGS	AMENDM	ENTS		
Profit	Amendment			
NonProfit	Resignation of F	I.A., Officer/Director		
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Examiner's Initials

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:

RG RELAXATION ROOM INC.



ARTICLE II - PRINCIPAL OFFICE

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

5539 SW 85+ 200 Floor SUH 200 B missin, F/ 33/34

ARTICLE III - SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RODRIGO GARZON 5539 SW 8 St Zdo Floor Suit 200 B Miami, F/ 33/34

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

RODRIGO GARZON 5539 SW 8 St Zdo Fleor Suit 200 B

The undersigned incorporator has executed these Articles of Incorporation this _____ day of _____ 20_3

ARTICLE VI- DIRECTOR(S)

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

RODRIGO GARZON PRESIDENT 5539 SW 8 St Z& Floor SUIT ZOOB MIUMI, F/ 33/34

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