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Account Name : SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A.
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FLORIDA PROFIT CORPORATION OR P.A.

PERFUME CONNECTION I, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE ONE

NAME

The name of the corporation shall be:
Perfume Connection I, Inc.

ARTICLE TWO-

PRINCIPAL OFFICE

The principle place of business and mailing address of this Corporation shall be:

5601 Lyons Road Suite H5
Coconut Creek, FL 33073

SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A.

2801 N. University Drive suite 301

CORAL SPRINGS, FL 33065

(954)753-2222

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ARTICLE THREE
CAPITAL STOCK

The number of shares of stock that this Corporation is authorized to have outstanding at one time is one thousand shares of common stock with a par value of one dollar.

ARTICLE FOUR

INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is:

Ron Livni
6601 Lyons Road Suite H5
Coconut Creek, Fl 33073

ARTICLE FIVE

INCORPORATOR

The name and address of the Incorporator is:

Ron Livni
6601 Lyons Road suite H5
Coconut Creek, Fl 33073

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May.24. 2004 11:29AM

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The undersigned has executed these Articles of
Incorporation. This 24th day of May.

Signature: RON LIVNI

Date: 5/24/2004

CERTIFICATE OF DESIGNATED REGISTERED AGENT

Pursuant to the provisions of section 607.0501 Florida
Statutes, the Undersigned Corporation, under the Laws of the
State of Florida submits to the following statement
designating the registered agent in the State of Florida.

1. The name of the corporation is:
Perfume Connection I, Inc.

2. The name and address of the registered agent
Ron Livni
6601 Lyons Road Suite H5
Coconut Creek, Fl 33073

Signature: RON LIVNI

Date: _____

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Having been named as the Registered Agent and to accept service of process for the above stated corporation at the place designated in this Certificate, I accept the appointment as Registered Agent and agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Signature: RON. LIVNI

Date: 5/24/04

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