P04000116415

(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:	1			

Office Use Only

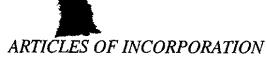


100038376391

07/20/04--01078--001 **78.75

SECTION OF THE SECTIO

به ن دار کر مرکر ا



of

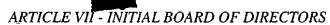
Skin's In, In	٤.		
	(name of corporation)		
The undersigned acting as the incorporators of the following articles of incorporation for such corporation		ess Corporation Act, a	adopt(s)
The name of the corporation is:	In Inc.	04 AUS -	01/V 35038
And This corporation shall exist perpetually unless of	RTICLE II - DURATION lissolved according to Florida law.	FM 2: 16	
A	RTICLE III - PURPOSE		
The corporation is organized for the purpose of United States and the State of Florida.	engaging in any activities or business	permitted under the	laws of the
The corporation is authorized to issue 600	/ - INITIAL PRINCIPAL OFFICE		per share.
STREET ADDRESS		: - 5	
1029 W. University Ave	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
CITY Gamesville	FLORIDA	ZIP 32	401
Mailing address, if different			
STREET ADDRESS	and the second of the second o	<u> </u>	
CITY	FLORIDA	ZIP	<u></u>
ARTICLE VI - INITI	AL REGISTERED OFFICE AND A	GENT	
The street address of the initial registered of			office is:
		,	
ADDRESS, 10.74	anne Thompson - 5816 NW 26 Trace		المتعدد المساعد الم
W. University /	- 1016 NW 46 MAC		153

CITY

FLORIDA

Germosnile

ZIP 3360



NAME David Stillwell		
ADDRESS PO BOX 357273		
CITY Gainesville	STATE F	ZIP 32635-77
NAME Kenneth Henderson		
ADDRESS GIS NW 15th St.		
CITY Games ville	STATE [ZIP 3260]
NAME Manage Thompson		
ADDRESS 5816 NW 26th TERR		
CITY Garnesolle	STATE F	ZIP 32453
ARTICLE VI	II - INCORPORATORS	
he names and addresses of the incorporators signing thes	e Articles of Incorporation are	as follows:
NAME David Stillwell		
ADDRESS PO Box 35 7273		
CITY Gainesville F)	STATE J [ZIP 32135-7273
NAME Kenneth Henderson	7 1	
ADDRESS GIS N W 15th St		
CITY Gaines ville	STATE 🎜	ZIP 32601
		OHOU
Marianne Mampoor		
3818 20 104	STATE CI	7ID a
O WINESVILLE		ZIP 32653
The undersigned incorporator(s) have executed these av of	* · · · · · · · · · · · · · · · · · · ·	is <u>ID</u>
ay of July		
·-·	A A A A	
	you your	(Signature)
	By Both	_ / (0:
	1	(Signature)
		(Signature)



5Kin's In the.
(name of corporation)
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation
at took of threesty Ave 5816 NW26 TERR
Gainesville Fl 32601 32653
has named Manager Thompson ?
located at the aforesaid address, as its registered agent to accept service of process within this
state.
ジ 通
<u>~~~</u> ~~~
Having been named as registered agent and to accept service of process for the above stated
corporation at the place designated in this certificate, I hereby accept the appointment as regis-
tered agent and agree to act in this capacity. I further agree to comply with the provisions of all
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.
// / /

(Date)