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To: Division of Corporations
Fax Number : (850)205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 OCT 14 A 11:34

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FLORIDA PROFIT CORPORATION OR P.A.

ILEANA'S BEAUTY & BARBER SHOP INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF**

ILEANA'S BEAUTY & BARBER SHOP INC .

The undersigned incorporator (s). For the purpose of forming a Corporation under the Florida General Corporation Act, hereby adopt (s) the following Articles of Incorporation.

ARTICLE I : NAME

The name of the Corporation shall be : **ILEANA'S BEAUTY & BARBER SHOP INC .**

The principal place of business of this Corporation shall be :
**1249 N W 29TH STREET
Miami, Fl., 33142**

ARTICLE II : NATURE OF BUSINESS

This Corporation may engage in or transact any or all Lawful activities or business permitted under the Laws of the United States of America, the State of Florida, or any other State, County, territory or Nation.

ARTICLE III : CAPITAL STOCK

The aggregate number of shares of stock and its par value that this Corporation is authorized to have outstanding at any one time is : **200 SHARES NO PER VALUE.**

ARTICLE IV : TERM OF EXISTENCE

This Corporation is to exist perpetually.

ARTICLE V : OFFICERS DIRECTORS

The name (s) and street address (es) of the Initial Officer (s) and Director (s), if any, who shall hold officer the first year of the Corporation's existence or until their successor is (are) elected.

Is (are) :

**ILEANA CESPEDES
11820 S W 103RD. LANE
MIAMI, FLORIDA 33186**

ARTICLE VI : INCORPORATOR (S)

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

ILEANA CESPEDES
11820 S W 103RD. LANE
Miami, Fl., 33186

IN WITNESS WHEREOF, the undersigned incorporator (s) has (have) executed these Articles of Incorporation this **07** day of **October**, of the year **2004**.

Signature (s) of Incorporator (s)

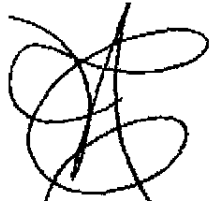


ILEANA CESPEDES
President-Treasurer

STATE OF FLORIDA

COUNTY OF MIAMI DADE

THE FOREGOING, instrument was acknowledged and sworn to before me this **07** day of **October**, of the year **2004** by **ILEANA CESPEDES**.



NOTARY PUBLIC

TANYA M. NUNEZ
Notary Public, State of Florida
My comm. exp. **May 10, 2005**
Comm. No. **DD 024476**

**CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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.- The name of the Corporation is : **ILEANA'S BEAUTY & BARBER SHOP INC.**

2.- The name and Street Address of the Registered Agent and Office is :

**ILEANA CESPEDES
11820 S W 103RD. LANE
Miami, FL, 33186**

Signature X *Ileana Cespedes*
**ILEANA CESPEDES
President-Treasurer**

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HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE I HEREBY AGREE TO ACT IN THIS CAPACITY AND COMPLETE PERFORMANCE OF MY DUTIES AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.326 FLORIDA STATE.

DATE : October 07 , 2004

Signature *Ileana Cespedes*
Registered Agent

Date : October 07, 2004