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## TRANSMITTAL LETTER

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

inal and one (1) copy of the arti  \$78.75  Filing Fee  & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
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NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED 04 NOV 24 PM 3: 29
ARTICLE I NAME  The name of the corporation shall be:  Miami Lakes Beauty	SCOM LARY OF STATE.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:  H715 NW 1574 STREET  Suit # 21  ARTICLE III PURPOSE MIGHT - FL 33014	Mailing
The purpose for which the corporation is organized is:	Address:
ARTICLE IV SHARES	3918522
The number of shares of stock is:	Miami Beh- + L
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	3333
President-D Chris Amore 288 Brickell # 605 Miami-FL	Key U
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:	
Chris Angelian Bas Brickell Kun Dr	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:  Chris Angelini  888 Brinkell key Dr	
# 605 ************************************	******
Having been named as registered agent to accept service of process for the above stated corp certificate, I am familiar with and accept the appointment as registered agent and agree to act	

Signature/Registered Agent Incorporator