

P05000/62209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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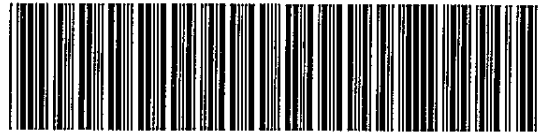
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05 DEC 12 PM 4: 14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch DEC 13 2005

## TRANSMITTAL LETTER

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

SUBJECT:           L'ALLUMER MEDSPA INC.            
(Proposed Corporation name – must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

FROM: Miriam R. Goldin, VP  
Arnold S Goldin & Associates Inc.  
5030 Champion Blvd. #G-6231  
Boca Raton, FL 33496  
1-800-873-1900

NOTE; Please provide the original and one copy of the articles.

## 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: L'ALLUMER MEDSPA INC.

### ARTICLE II PRINCIPAL OFFICE

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

5030 CHAMPION BLVD. #G6285, BOCA RATON, FL 33496

### ARTICLE III SHARES

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

100 shares

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

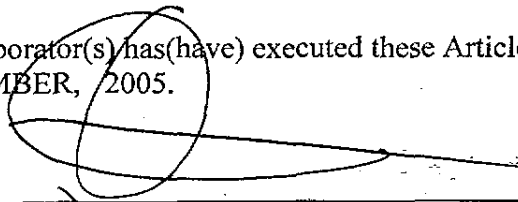
Arnold S. Goldin 5030 Champion Blvd. #G-6231, Boca Raton, FL 33496

### ARTICLE V INCORPORATOR(S)

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

Arnold S. Goldin 5030 Champion Blvd. #G-6231, Boca Raton, FL 33496

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  
7<sup>TH</sup> Day of DECEMBER, 2005.

  
(Signature)

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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: L'ALLUMER MEDSPA INC.

2. The name and address of the registered agent and office is:

Arnold S. Goldin  
5030 Champion Blvd. #G-6231  
Boca Raton, FL 33496

*Having been named as registered agent and to accept service of process for the stated corporation at the 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 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)

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA