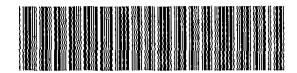
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- (Requestor's Name)	
	(Address)	
	Address)	
	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of S	Status
Special Instructions to Filing Officer:		

Office Use Only

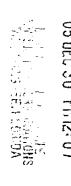
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SECRETARY OF STATE



CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

omni Salon & Spathic	
	-
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by 12/2/	UCC 1 or 3 File
Name Date Time	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

05 DEC 30 AM 11: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Omni Salon & Spa, Inc., a Florida corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7990 Baymeadows Road, East #923 Jacksonville, Florida 32256

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to conduct any and all lawful business

ARTICLE IV_ SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Gina Wheatley - President/Secretary/Treasurer

7990 Baymeadows Road, East #923 Jacksonville, Florida 32256

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Gina Wheatley

7990 Baymeadows Road, East #923 Jacksonville, Florida 32256

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gina wheatley

7990 Baymeadows Road, East #923

Jacksonville, Florida 32256

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

X_00-

Date

Date