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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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TALLAHASSEE, FLORIDA
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FLORIDA PROFIT/NON PROFIT CORPORATION

polish - the beaty spa inc.

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11/9/07

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

POLISH - The Beauty Spa Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

~~Beauty~~ 21230 NE 14th Avenue
MIAMI, FL. 33179

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Beauty Salon/SPA

ARTICLE IV SHARES

The number of shares of stock is:

1,000 @ \$10 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

FRED FUNEUS
900 SW 75th Avenue
Plantation, FL 33317

ARTICLE VI REGISTERED AGENT

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

~~SAME~~ FRED FUNEUS
900 SW 75th Avenue
Plantation, FL. 33317

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Fred Funeus
900 SW 75th Avenue
Plantation, FL 33317

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

1-17-07
Date


Signature/Incorporator

1-17-07
Date

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

POLISH- The Beauty Spa, Inc.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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.


REGISTERED AGENT

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