

P870000060570

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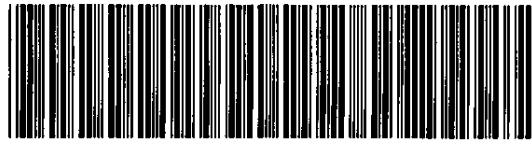
(Business Entity Name)

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2007 MAY 18 P 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Handwritten: 400098760834



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 30, 2007

IRIS KOGAN
11013 INDIAN OAKS DR.
TAMPA, FL 33625

SUBJECT: PERFECT LASER TOUCH, INC.
Ref. Number: W07000020803

We have received your document for PERFECT LASER TOUCH, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham
Document Specialist
New Filing Section

Letter Number: 407A00029485

MARCH 1, 2007

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

Dear Division of Corporations:

Enclosed please find Articles of Incorporation for "PERFECT LASER TOUCH, INC."

along with a check in the amount of \$70.00 for filing fee and designation of registered agent.


Also enclosed is a photocopy of the articles. Please return these to me in the enclosed envelope with the filing date stamped on it. Please note that the effective starting date for operations for this company is 01/01/2007.

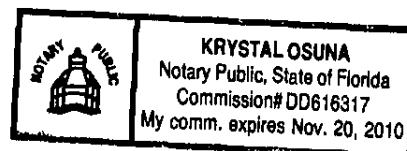
Sincerely,



IRIS KOGAN
313 S. HOWARD AVE.
STE-8
TAMPA, FL 33606

State of Florida, County of Hillsborough
The foregoing instrument was acknowledged
before me on this 24 day of April, 2007


Notary Signature
Personally known _____
Identification produced KIDL





FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

07 MAY 18 PM 2:07

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

April 30, 2007

IRIS KOGAN
11013 INDIAN OAKS DR.
TAMPA, FL 33625

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ARTICLES OF INCORPORATION OF
PERFECT LASER TOUCH, INC.

I, the undersigned incorporator of this corporation under chapter 607, Florida statute as amended, do hereby associate myself to form a corporation and adopt the following articles of incorporation.

ARTICLE 1 NAME

The name of this corporation shall be: PERFECT LASER TOUCH, INC.

The principal place of business of this corporation shall be

313 S. HOWARD AVE. STE 8
TAMPA, FL 33606

ARTICLE II

PURPOSE AND 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, the State of Florida, or any other state.

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: 1000 shares, par \$1.00.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

IRIS KOGAN
11013 INDIAN OAKS DR.
TAMPA, FL 33625


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TALLAHASSEE, FLORIDA

The name and street address of the incorporators to these articles of incorporation are:

IRIS KOGAN
11013 INDIAN OAKS DR.
TAMPA, FL 33625

In witness whereof, the undersigned incorporators have executed these Articles of Incorporation this 10 day of May 2007.

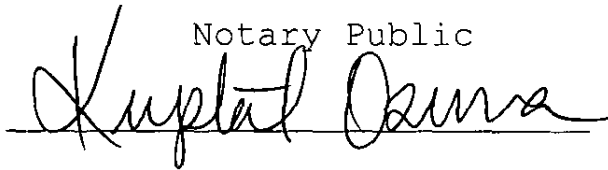
Signature of Incorporators



State of Florida
County of Hillsborough

The foregoing instrument was acknowledged and sworn before me this 10 of May, 2007 by IRIS KOGAN OF PERFECT LASER TOUCH, INC.

Notary Public



My commission expires
Nov. 20, 2010

SEAL: Article of Incorporation fee: \$35.00



**CERTIFICATE OF DESIGNATION
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:

PERFECT LASER TOUCH, INC.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

**IRIS KOGAN
11013 INDIAN OAKS DR.
TAMPA, FL 33625**

SIGNATURE _____

CORPORATE OFFICER

TITLE _____

REGISTERED AGENT

DATE _____

4/21/07

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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**HAVING BEEN NAMED TO ACCEPT SERVICES OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I
HEREBY AGREE TO ACT IN THIS CAPACITY AND I FURTHER AGREE TO
COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE
DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.**

SIGNATURE _____

DATE _____

4/21/07

REGISTERED AGENT FILING FEE: \$35.00