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CORF	PORATION NAME(S) & DOC	UMENT NUMBER(S), (if known):	
1	(Corporation Name)	SKIN CARE &	HAIR
2	REMOVAL CO	ORP. (Document #)	
3	(Corporation Name)	(Document #)	_
4	(Corporation Name)	(Document #)	-
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\$0000	V FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
	HER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	Y

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TALLATUSSEF, FLORIDA

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.

The name of the corporation shall be: GION SKIN CARE & HAIR REMOVAL CUYP. (exctive Date 01.02.08)

ARTICLE II - PRINCIPAL OFFICE

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

3670-72 NW 15T MIAMI, Fl. 33125

ARTICLE III - SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Vanessa Alvarenga 3670-72 NW 1 ST UIAMI, Fl-33125

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Vantosa Alvarenga 3670-72 NW 157 Ulami, F1.33125

The undersigned incorporator has executed these Articles of Incorporation this 28 day of 040. 2007

ARTICLE VI- DIRECTOR(S)

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

Vanessa Alvarenga (Prosident) 3670-72 NWI ST MIAMI, FI. 33125

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related 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 Signature