

FD80000084855

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000215172 3)))



H080002151723ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : FASTKIT CORPORATE OUTFITS  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

RECEIVED SEP 15 2008

FLORIDA PROFIT/NON PROFIT CORPORATION

BEAUTY LIFE INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

FILED  
08 SEP 15 AM 11:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRD 9/16

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

08 SEP 15 AM 11:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**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:

**BEAUTY LIFE INC.****ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

**918 NW 136 Place Miami Florida 33182****ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Telemarketing and all other activities permitted by the laws of the State of Florida and the United States of America.

**ARTICLE IV SHARES**

The number of shares of stock is:

**100 Shares****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Sandra Novoa 15133 SW 179 ST Miami FI 33187 President /Treasure/Director 50 shares

Grisell Hernandez 918 NW 136 Place Miami FI 33182 Vice President /Secretary /Director 50 shares

**ARTICLE VI REGISTERED AGENT**

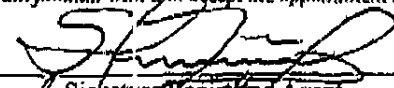
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

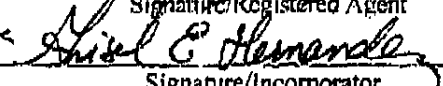
**Sandra Novoa 15133 SW 179 ST Miami Florida 33187****ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

**Grisell Hernandez 918 NW 136 Place Miami Florida 33182**

\*\*\*\*\*  
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

K   
\_\_\_\_\_  
Signature/Registered Agent

x   
\_\_\_\_\_  
Signature/Incorporator

09/15/2008

Date

09/15/2008

Date