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CORPORATION NAME(S) & DOCUMENT	NUMBER(S), (if known):
1. HELEN BEAUTY S	DALON AND BARBER INC.
2.	
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4.	•
(Corporation Name)	(Document #)
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Profit	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
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Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
·	Examiner's Initials

CR2E031(7/97)

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.

<u>ARTICLE I – NAME</u>

The name of the corporation shall be:

HELEN BEAUTY Salon and Barber Inc.

ARTICLE II - PRINCIPAL OFFICE

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

3084 NW 7 STreet Miami FL 33125

<u>ARTICLE III – SHARES</u>

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

100

<u>ARTICLES IV – INITIAL REGISTERED AGENT AND STREET</u> <u>ADDRESS</u>

The name and address of the initial registered agent is:

Elena E Martinez 3084 NW 7 STreet Mami FL 33125

ARTICLE V - INCORPORATOR

THE NAME AND STREET ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

Elena E. Martinez			
3084WW 7 STreet MIOMI FL 33125			
MIOMITE 33125 THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE AR	TICLES	j .	
OF INCORPORATION THIS DAY OF OCTUBER, 2008			
	SECH	70 80	to war
SIGNATURE	ETAHY HASSE	10	学と
SIGNATURE	F SI	AH IO:	
ARTICLE VI - DIRECTOR(S)): 38	1,"

THE NAME(S) AND STREET ADDRESS (ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

ELENA E. MARTINEZ (PRESident)

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