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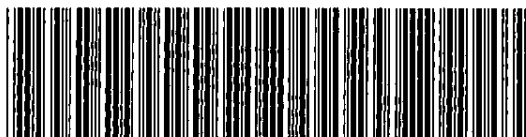
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 3/5/09

DOSS | WEEKS
CERTIFIED PUBLIC ACCOUNTANTS

Stephen E. Doss, CPA

Donald Robert Weeks, CPA

February 27, 2009

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

RE: I LASHES, INC.

To Whom It May Concern:

Enclosed you will find the original and one copy of the executed Articles of Incorporation and Certificate of Registered Agent/Registered Office for I LASHES, INC. Also, enclosed please find a check in the amount of \$70.00 for the filing fees.

Please return the stamped copy and all correspondence concerning this matter to the attention of Rob Weeks, at Doss Weeks, P.A., 2338 South 8th Street, Fernandina Beach, FL 32034.

Thank you in advance for your assistance. If you have any questions, please feel free to call me at (904) 277-0009.

Sincerely,



Rob Weeks

Enclosures

ARTICLES OF INCORPORATION

OF

I LASHES, INC.

The undersigned, acting as incorporator under the provisions of the laws of the State of Florida, hereby adopts the following Articles of Incorporation:

ARTICLE I. NAME

The name of this corporation is: **I LASHES, INC.**

ARTICLE II. NATURE OF BUSINESS

This corporation is being organized for the transaction of any and all lawful business permitted under the Florida Business Corporation Act and the laws of the United States.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of capital stock that the corporation is authorized to issue is Ten Thousand (10,000) shares with a par value of \$1.00 each. All of the shares are of one class only.

ARTICLE IV. TERM OF EXISTENCE

The corporation is to exist perpetually.

ARTICLE V. ADDRESS

The initial office address of the principal office of this corporation is: 855 Atlantic View Drive, Fernandina Beach, FL 32034. The mailing address is: 855 Atlantic View Drive, Fernandina Beach, FL 32034. The Board of Directors may from time to time move the principal office to any other address in Florida.

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ARTICLE VI. DIRECTORS

This corporation shall have two directors initially. The number of directors may be increased or diminished from time to time by by-laws adopted by the stockholders, but shall never be less than one (1).

ARTICLE VII. INITIAL DIRECTORS

The name and post office address of the initial directors who shall hold office for the first year of corporate existence or until their successor is elected or appointed and have qualified are:

<u>DIRECTOR</u>	<u>ADDRESS</u>
BROM KING	855 Atlantic View Drive Fernandina Beach, FL 32034
ERIN E. SCHRODER	147 Glenwood Avenue Meadville, PA 16335

ARTICLE VIII. INCORPORATOR

The name and post office address of the incorporator of this corporation is:
Donald Robert Weeks, Doss Weeks, P.A. 2338 South 8th Street, Fernandina Beach,
Florida 32034.

ARTICLE IX. OFFICERS

The names and post office addresses of the officers who shall hold office for the first year of corporate existence or until their successors are elected or appointed are:

<u>NAME</u>	<u>OFFICE</u>	<u>ADDRESS</u>
BROM KING	President/ Secretary	855 Atlantic View Drive Fernandina Beach, FL 32034
ERIN E. SCHRODER	Vice President/ Treasurer	147 Glenwood Avenue Meadville, PA 16335

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ARTICLE X. REGISTERED AGENT

The name and address of the initial registered agent of this corporation is
Brom King, 855 Atlantic View Drive, Fernandina Beach, FL 32034.

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TALLAHASSEE, FLORIDA

ARTICLE XI. AMENDMENTS

These Articles of Incorporation may be amended in the manner provided by law.
Every amendment shall be approved by the Board of Directors, proposed by them to the stockholders, and approved at a stockholders' meeting by a majority of the issued and outstanding stock entitled to vote thereon, unless all the Directors and all the stockholders sign a written statement manifesting their intention that a certain amendment to these Articles of Incorporation be made. Each and every action required to be voted upon and thereby approved by the stockholders shall be approved by a majority vote of the stockholders.

EXECUTED this 27TH day of FEBRUARY, 2009.



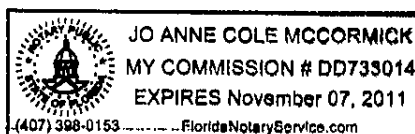
DONALD ROBERT WEEKS
Incorporator

STATE OF FLORIDA
COUNTY OF NASSAU

The foregoing instrument was acknowledged before me this 27th day of February, 2009, by DONALD ROBERT WEEKS, who is personally known to me or who presented Devin Lewis as identification and who did take an oath.



Name:
Notary Public, State of Florida
My Commission Expires:



CERTIFICATE OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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: I LASHES, INC.
2. The name and address of the registered agent and office is:

BROM KING
855 ATLANTIC VIEW DRIVE
FERNANDINA BEACH, FL 32034

Signature


DONALD ROBERT WEEKS

Title

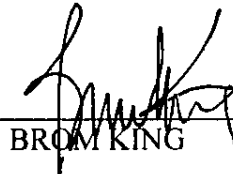
INCORPORATOR

Date

February 27, 2009

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE 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 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.

Signature


BROM KING

Date

2/27, 2009

Registered Agent Filing Fee: \$35.00

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TALLAHASSEE, FLORIDA