P1000000860

| (Requestor's Name) | |
|---|--------------|
| (Address) | _ |
| (Address) | - |
| (City/State/Zip/Phone #) | _ |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | _ |
| Special Instructions to Filing Officer: | , |
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| | ten |
| Office Use Only | |
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TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE DIVISION OF CORPORATION 2

SECRETARY OF STATE

FILED

E Buren JAN 6 2010

| 1/4 | 12010 |
|---------------------|-------------------------|
| 46 | Raeme Hartland |
| Requestors N 192 | O NE 54 th STREET |
| Address F | +. Lauderdale, FL 33308 |
| CITY | State ZIP Phone |
| | (954) 663-9568 |

CORPORATION(S) NAME

| encho | inted by | eauty, I | nc. |
|--|------------------------------------|----------------|---|
| | | | |
| | | | |
| (X) Profit | () Amendment | (|) Merger |
| () Foreign | () Dissolution | . (|) Mark |
| () Limited Partnership () Reinstatement | () Annual Repo () Reservation | |) Other) Change of Registered Agent |
| Certified Copy | () Photo Copie | » (Ž | Certificate Under Seal |
| () Call When Ready | () Call If Probi) Will Wait | em (X) Pick Up |) After 4:30 () Mail Out |
| Name Availability Document | | • | |
| Exeminer | | , | |

CR2E031 (R8-85)

Verifier

W.P. Varifier

Empire Toll Free: 1-800-432-3028

COVER LETTER

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

SUBJECT: ENCHANTED BEAUTY, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:





Filip Fee & Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

| | ME HARTLAND |
|---------|--------------------------|
| | Name (Printed or typed) |
| 1920 N | .E 54th Street |
| | Address |
| FORT | AUDERDALE, FL 33308 |
| | City, State & Zip |
| 954-663 | 3-9568 |
| | Daytime Telephone number |

NOTE: Please provide the original and one copy of the articles.

COVER LETTER

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

SURIFCT: ENCHANTED BEAUTY, INC.

 $(PROPOSED\ CORPORATE\ NAME-\underline{MUST\ INCLUDE\ SUFFIX})$

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:





Filin Fee \$87.50
Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

| M: | GRAEME HARTLAND |
|----|--|
| | Name (Printed or typed) |
| | 1920 N.E 54th Street |
| • | Address |
| | FORT LAUDERDALE, FL 33308 |
| | City, State & Zip |
| | 954-663-9568 |
| | Daytime Telephone number |
| | SUE@FABPRODUCTS.COM |
| - | E-mail address: (to be used for future annual report notification) |

NOTE: Please provide the original and one copy of the articles.

| , 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: | */ |
| ENCHANTED BEAUTY, INC. | 200 |
| | |
| ARTICLE II PRINCIPAL OFFICE | ₹ |
| The principal street address and mailing address, if different is: | · 经 |
| 1920 NE 54th STREET | 三点 🗷 . |
| FORT LAUDERDALE FL, 33308 | |
| ARTICLE III PURPOSE | F 34 CRIDA |
| The purpose for which the corporation is organized is: | |
| BEAUTY CONSULTING | |
| | |
| ARTICLE IV SHARES | |
| The number of shares of stock is: | |
| 100 | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS | |
| List name(s) address(es) and specific title(s): | |
| GRAEME HARTLAND - PRESIDENT | |
| 1920 NE 54th STREET | |
| FORT LAVOERDACE FL 33308 | |
| ARTICLE VI REGISTERED AGENT | |
| The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: | |
| PURE ENERGY NETWORK, INC. | |
| 11201 PINE VALLEY DRIVE | |
| WELLINGTON, FL 33414 | |
| ARTICLE VII INCORPORATOR | |
| The <u>name and address</u> of the Incorporator is: GRAEME HARTLAND 1920 NE 5444 STREET | |
| 1920 NE 544 STREET | |
| FORT LANDERDALE, FL 333 | 08 |
| ****** | ***** |

place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

| 2-28-09 |
| Signature/Registered Agent | 12-28-09 |
| Signature/Incorporator | Date

Having been named as registered agent to accept service of process for the above stated corporation at the