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Division of Corporations

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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**SalonWhere Inc.**

Certificate of Status	1
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## 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.*

### ARTICLE I NAME

The name of the corporation shall be:

**SalonWhere Inc.**

### ARTICLE II PRINCIPAL OFFICE

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

**SalonWhere Inc.**

**450 SW Carter Avenue  
Port St. Lucie, FL 34983**

### ARTICLE III SHARES

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

**100 Shares at No Par Value**

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**William Zimmerman  
450 SW Carter Avenue  
Port St. Lucie, FL 34983**

**Prepared By:**

**Bruce B. Hubbard  
77 East John St.  
Hicksville, New York 11801  
1-516-835-3940**

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**ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)**

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

**William Zimmerman - 450 SW Carter Avenue, Port St. Lucie, FL 34983 - President/Director**

**Donald R. Galbreath - 174 Oster Point Way, Palm Harbor, FL 34683 - Director**

**ARTICLES VI INCORPORATOR(S)**

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

**William Zimmerman - 450 SW Carter Avenue, Port St. Lucie, FL 34983**

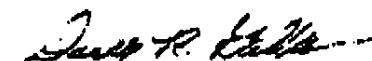
**Donald R. Galbreath - 174 Oster Point Way, Palm Harbor, FL 34683**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

17th day of June 2010



**William Zimmerman - Signature**



**Donald R. Galbreath - Signature**

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**CERTIFICATE OF DESIGNATION 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 THE DESIGNATING THE  
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Salon Where Inc.**

2. The name and address of the registered agent and office is:

**William Zimmerman**

Name

**450 SW Carter Avenue**

(P.O. Box or Mail Drop Box NOT Acceptable)

**Port St. Lucie, FL 34983**

(City / State / Zip)

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*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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*



**William Zimmerman**  
SIGNATURE

**June 17, 2010**

(Date)

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