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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
TOUCH OF EUROPE USA, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Touch of Europe USA, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
940 W. Hallandale Beach Blvd.
Hallandale Beach, FL 33009

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
to transact any and all lawful business.

ARTICLE IV SHARES
The number of shares of stock is: 1,000 @\$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jolanta Saris-Szyfter, President	Name and Title: _____
Address: 1535 Madison Street	Address: _____
Hollywood, FL 33020	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

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

Name: Daniel R. Farmer
Address: 968 W. Hallandale Beach Blvd.
Hallandale Beach, FL 33009

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Daniel R. Farmer
Address: 968 W. Hallandale Beach Blvd.
Hallandale Beach, FL 33009

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

Daniel R. Farmer
Required Signature/Registered Agent

October 7th, 2010
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Daniel R. Farmer
Required Signature/Incorporator

October 7th, 2010
Date

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