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FLORIDA PROFIT/NON PROFIT CORPORATION

Dan's Unisex Inc.

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$78.75 |

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SECRETARY OF STATE DIVISION OF COOP STATE H10000236895 2018 OCT 29 PM 2: 09

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:

Dan's Unisex Inc.

ARTICLE II PRINCIPAL OFFICE

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

Dan's Unisex Inc. 2670 S. Rio Grande Ave. Orlando, FL 32805

ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Pascale Hilaire 314 Penrose Ct. Apopka, FL 32704

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-9840

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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(arc):

Daniel Louis-President/ Director 314 Penrose Ct. Apopka, FL 32704

ARTICLES VI INCORPORATOR(S)

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

Daniel Louis 314 Ponrose Ct. Apopks, FL 32704

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

27th day of October 2010

Daniel Louis 7:31gnature

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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 | E Dan's Unisex Inc. | | - |
|-------------------------------------|--|--|-----------------------|
| 2. The name and address of the regi | stored agent and office is: | | |
| | Pascale H | ilaire | |
| | | Name | |
| | 314 Penre | ose Ct. | |
| | (P.O. Box or Mail | Drop Box NOT Acceptable) | |
| | Apopks, | FL 32704 State / Zip) | |
| agent and agree to act in this cap | ed in this certificate, I hereby acity. I further agree to comp He performance of my duties, | of process for the above stated accept the appointment as registered ly with the provisions of all the statutes and am familiar with and accept the | JIVISION OF COLF COST |
| Pascale Hilaire SIGNATURE | | October 27, 2010 (Date) | |