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FLORIDA PROFIT/NON PROFIT CORPORATION
GABLES BARBER SHOP, INC.

Certificate of Status 0
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**ARTICLES OF INCORPORATION
FOR
GABLES BARBER SHOP, INC.**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act; hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I - Name:

The name of the corporation is: Gables Barber Shop, Inc.

ARTICLE II - Principal Office:

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

8401 NW 8 Street
407
Miami, FL 33126

ARTICLE III - Purpose:

The purpose for which this corporation is organized is:
to engage in any lawful act or activity

ARTICLE IV - Shares:

The number of shares the corporation is authorized to issues is:
1000 Shares at One Dollar (\$ 1.00) par value Common Stock

ARTICLE V - Registered Agent:

The name and the Florida street address of the registered agent is:

Juan C Aragon
8401 NW 8 Street
407
Miami, FL 33126

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ARTICLE VI – Incorporator(s):

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


Juan C Aragon
8401 NW 8 Street
407
Miami, FL 33126

ARTICLE VII – Director(s):

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

Juan C Aragon (President & Secretary)
8401 NW 8 Street
407
Miami, FL 33126

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 19th day of April, 2011


Signature

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ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

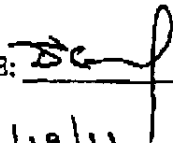
Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation is: Gables Barber Shop, Inc.
- 2. The name and address of the registered agent and office is:

Juan C Aragon
 8401 NW 8 Street
 # 407
 Miami, FL 33126

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE 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: 
 DATE: 4/19/11

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