

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

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

Email Address: _____

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**FLORIDA PROFIT/NON PROFIT CORPORATION
JADORE RAW BEAUTY, 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

The name of the corporation shall be:

Jadore Raw Beauty, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address is:

17435 Orange Blvd, Loxahatchee, FL 33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact any and all lawful business within the State of Florida, United States and any Nation.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es)

Lesly N. Limontas 17435 Orange Blvd, Loxahatchee, FL 33470 P/T/S

ARTICLE VI REGISTERED AGENT

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

Lesly N. Limontas 17435 Orange Blvd, Loxahatchee, FL 33470

ARTICLE VII INCORPORATOR

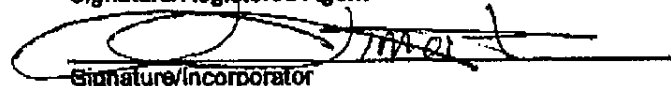
The name and address of the incorporator is:

Lesly N. Limontas 17435 Orange Blvd, Loxahatchee, FL 33470

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.


Signature/Registered Agent

10/25/11
Date


Signature/Incorporator

10/25/11
Date

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