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SECRETARY OF STATE TALLAHASSEE, FLORIDA

### ARTICLES OF INCORPORATION

The undersigned incorporator (s), for the purpose of forming a corporation under the Florida general Corporation Act, hereby adopt(s) the following Articles of incorporation.

#### Article INAME

The name of the corporation shall be:

#### DIVINE BEAUTY SUPPLY, INC.

The principal place of business of this corporation shall be:

245 NE 96<sup>TH</sup> STREET MIAMI SHORES, FL 33138

#### ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value this corporation is authorized to have outstanding at any one time is: 100 shares.

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

SALNAVE PIERRE 245 NE 96TH STREET MIAMI SHORES, FL 33138

PRESIDENT

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#### ARTICLE VUINCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is (are):

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 24th of February, 2012.

SALNAVE PIERRE 245 NE 96<sup>TH</sup> STREET MIAMI SHORES, FL 33138

Signature(s) of Incorporator

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607,325, 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:

#### DIVINE BEAUTY SUPPLY, INC.

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

SALNAVE PIERRE

(P O BOX NOT ACCEPTABLE)

245 NE 96<sup>7H</sup> STREET MIAMI SHORES, FL 33138

(CITY/STATE/ZIP)

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

gnature SALMAVE PIERRE

Title President

Date \_\_\_February 24, 2012

HAVING BEEN NAMED TO ACCEPT OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607,325 FLORIDA STATUTES

Signature SALNAY PIER

Date February 24, 2012