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(Re	questor's Name)	
(Ád	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETĂRY OF STATE. DIVISION OF CORPORATIONS

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

_{subject:} End	less Beauty MD	Inc.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an origi	inal and one (1) copy of the arti	cles of incorporation and	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
_{FROM:} Li	via A Jaen		
71	Name 100 NE 7th Ave	(Printed or typed)	
	·	Address	
<u>Bo</u>	oca Raton FI 334	87 State & Zip	
56	61-702-5668		
	Daytime To	elephone number	

NOTE: Please provide the original and one copy of the articles.

rjaen@bellsouth.net

E-mail address: (to be used for future annual report notification)

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

	UNCIPAL OFFICE			
Principal street address		Mailing address, if different is:		
7100 NE 7th		· · · · · · · · · · · · · · · · · · ·	4	_
Boca Raton	FI 33487	 		
ARTICLE III PU The purpose for which and services	RPOSE a the corporation is organized is: .	vide health a	and beauty products	
			14 MAR	nivisio SECF
				NO PER
ARTICLE IV SE	IARES 100		AM 11: 39	CORPURATIONS
	ITIAL OFFICERS AND/OR DIRECTO	RS		
	Livia A Jaan Draaidant			
Name and Ti	Livia A Jaen, President	_ Name and Title:		
Name and Ti	7100 NE 7th Ave	_ Name and Title: _ Address:		
		_	,	
Address	7100 NE 7th Ave Boca Raton Fl 33487	Address:	,	
Address Name and Title	7100 NE 7th Ave Boca Raton Fl 33487	Address: Name and Title:	•	
Address	7100 NE 7th Ave Boca Raton Fl 33487	Address: Name and Title:	,	
Address Name and Titl Address	7100 NE 7th Ave Boca Raton Fl 33487	Address: Name and Title: Address:		

Name ar	nd Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) Livia A. Jaen	of the registered agent is:	
Name:		_	
Address:	7100 NE 7th Ave Boca Raton Fl 33487	_	SEC DIVISION
ARTICLE VII	INCORPORATOR		FILED FARY OF ISION OF BORP HAR -3 AM
The <u>name and a</u>	ddress of the Incorporator is: Livia A. Jaen		OF STATE OF
Ivanic.	7100 NE 7th Ave	_	39 IS
	Boca Raton Fl 33487	_	
	med as registered agent to accept service of proce am familiar with and accept the appointment as r		
× 1	A doo-		2/25/14
/	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein at Department of State constitutes a third degree fel		
X	19 dos		2/25/14
	Required Signature/Incorporator	, , , , , , , , , , , , , , , , , , , 	Date