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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.
Account Number : 104512000707
Phone : (305)803-2736
Fax Number : (305)646-1527

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

Email Address:

ARTISTRY SKIN CARE, INC.

FLORIDA PROFIT/NON PROFIT CORPORATION

~~ARTISTRY, CORP.~~

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|-----------------------|---------|
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May 21, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BUSINESS WORL TRANSACTIONS, INC.

SUBJECT: ARTISTRY, CORP.
REF: W18C0C048128

We have received your document for ARTISTRY, CORP. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity listed on the fax cover sheet and the name of the entity listed in the document must be identical. Please amend the document or the fax cover sheet accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Keyna E Page
Regulatory Specialist II

FAX Aud. #: H18000152189
Letter Number: 718A00010507

ARTICLES OF INCORPORATION

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

ARTICLE I

NAME

The name of the corporation shall be: ARTISTRY SKIN CARE, INC

ARTICLE II

PRINCIPAL OFFICE

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

1612 SW 24 AVE
MIAMI, FL 33145

ARTICLE III

PURPOSE

The purpose for which the corporation is organized is for 'Any and all lawful business'.

ARTICLE IV

SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated ☐COMMON SHARES.☐

ARTICLE V

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ISVET ROJAS
1612 SW 24 AVE
MIAMI, FL 33145

Prepared by: ISVET ROJAS
1612 SW 24 AVE
MIAMI, FL 33145
PH1

Electronically Sent By: BUSINESS WORLD TRANS
7951 S.W. 40 ST. (BIRD RD.) #201
MIAMI, FL. 33155
PH # (305) 267-4022

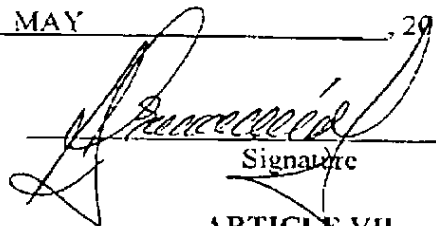
**ARTICLE VI
INCORPORATOR(S)**

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

ISVET ROJAS
1612 S.W. 24 AVE.
MIAMI, FL. 33145

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

16 day of MAY, 2018.



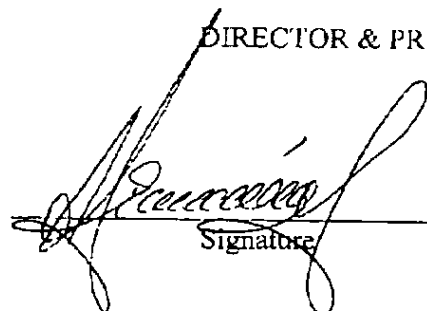
Signature

**ARTICLE VII
OFFICER(S) AND DIRECTOR(S)**

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

ISVET ROJAS
1612 S.W. 24 AVE.
MIAMI, FL. 33145

DIRECTOR & PRESIDENT



Signature

Signature

Signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607, 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: ARTISTRY SKIN CARE, INC.

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

ISVET ROJAS
1612 S.W. 24 AVE.
MIAMI, FL. 33145

Having been named as registered agent and to accept service of process for the above stated 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) MAY 16, 2018