Division of Corporations Electronic Filing Cover Sheet

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To;			
	Division of Co	rporations	
	Fax Number	: (850)617-6381	
		•	•
From:			· .
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	
	Account Number	: I20000000019	-
	Phone	: (305)552-5973	
	Fax Number	: (305)675-5944	
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Ente	r the email addr annual report ma	ess for this business entity to be used for futur ilings. Enter only one email address please.	e · ~
1	Email Address:		

FLORIDA PROFIT/NON PROFIT CORPORATION ANGEL'S BODY, INC.

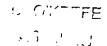
Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
Angel's Body, INC.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
9558 SW 162 Path Miani, fl 33196
Miani, fl 33196
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INTITAL DIRECTORS AND/OR OFFICE RS:
Adriana Patricia Lopez (P) 8
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:
Adriana Patricia Lopez
9558 SW 162 PATH
Miami, Fl 33196
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: Adviana Patricia Lopez
9558 SW 162 Path
Niami. (1 32191

Required Signatures:

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

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of S:ate constitutes a third degree felony as provided for in s.817.155, F.S.

08 - 10 - 20 20