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Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
VANILLA AESTHETIC CENTER, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$78.75

Electronic Filing Menu Corporate Filing Menu Help

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: VANILLA AESTHETIC CENTER, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
2735 CORAL WAY	7915 NW 64 STREET
MIAMI, FL 33145	MIAMI, FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO TRANSACT ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 200 SHARES PAR VALUE @ $1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARGARITA LINARES. PD	Name and Title:
Address: 7915 NW 64 STREET MIAMI, FL 33166	Address:
Name and Title:	Name and Title:
Address	Address:
Name and Title:	Name and Title:
Address	Address:

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TALLAHASSEE, FLORIDA

Name and Title:_____ Name and Title:_____

Address _____ Address: _____

_____ _____

_____ _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box **NOT** acceptable) of the registered agent is:

Name: MARGARITA LINARES

Address: 7915 NW 64 STREET

MIAMI, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: MARGARITA LINARES

Address: 7915 NW 64 STREET

MIAMI, FL 33166

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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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.

_____ 08/31/2022

Required Signature/Registered Agent Date

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 State constitutes a third degree felony as provided for in s.817.155, F.S.

_____ 08/31/2022

Required Signature/Incorporator Date