P95000048523

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL. 32314

JUNE 15, 1995

Reference: HAIR BY K.P., INC.

000001516740 -06/19/95--01057--005 *****70.00 *****70.00

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$ 70.00, this check represents the cost of the filing fees.

Very truly yours,

BILL M. SHAW

MAILING ADDRESS OF CORPORATION

HAIR BY K.P., INC.

P.O. BOX 152779

TAMPA, FLORIDA 33684-2779

PHONE (813) 287-5074

ARTICLES OF INCORPORATION

of HAIR BY K.P., INC. (name of corporation) The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida. ARTICLE I - CORPORATE NAME The name of the corporation is: HAIR BY K.P., INC. MAILING ADDRESS: P.O. BOX 152779 TAMPA, FL. 33684-2779 ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida, ARTICLE IV - CAPITAL STOCK The corporation is authorized to issue one thousand ___ shares (1,000) of ___one Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares." ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT The name and street address of the Initial Registered Agent of this Corporation is: NAME BILL M. SHAW ADDRESS 550 N. REO ST. CITY TAMPA **FLORIDA** ZIP 33609-1013 ARTICLE VI - INITIAL BOARD OF DIRECTORS This corporation shall have directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

| NAME | KAREN A. PATEL | | | |
|---------|-----------------|---------------|--------|--------------|
| ADDRESS | 5851 ESTES LANE | | | |
| CITY | WESLEY CHAPEL | STATE FLORIDA | zip 33 | 544 5 3 |
| NAME | | | | ICRE ICRE |
| ADDRESS | | | | المراز و |
| CITY | | STATE | ZIP | 1990 |
| NAME | | | | 4: 3 3:43 |
| ADDRESS | | | | 5 7 |
| CITY | | STATE | ZIP | |

ARTICLE VII - INCORPORATORS

The names and addresses of the person(s) signing these Articles of Incorporation are as follows:

| NAME BILL M. SH. | AW/ BUSINESS N | MANAGEMENT ACCOUNTING SERVICE | |
|--|--|--|---|
| ADDRESS 550 | N. REO STREET | MANAGEMENT ACCOUNTING SERVICE | S, INC. |
| | Λ | | |
| NAME | | STATE FLORIDA | ZIF 33609-1013 |
| ADDRESS | | | |
| CITY | | | |
| | | STATE | ZIP |
| NAME | <u></u> | | |
| ADDRESS | | | |
| CITY | | STATE_ | ZIP |
| day of JUNE | 19 <u>95</u> . | ed subscriber(8) have executed these Art. | Stan (Scal) |
| | | | (Scal) |
| | · | | (Scal) |
| | | | |
| | | | |
| TATE OF FLORIDA | |) | |
| TATE OF FLORIDA | BOROUGH |) ss | |
| COUNTY OF HILLS | | ے ۔ | County set forth above, personally |
| COUNTY OF HILLS clore me, a Notary Pub ppeared | lic authorized to t |) SS) lake acknowledgements in the State and | County set forth above, personally |
| COUNTY OF HILLS clore me, a Notary Pub ppeared | | ے ۔ | County set forth above, personally |
| COUNTY OF HILLS clore me, a Notary Pub ppeared BILL 1 | Nic authorized to t |) take acknowledgements in the State and | |
| clore me, a Notary Pub ppeared BILL M | M. SHAW |) lake acknowledgements in the State and | ticles of Incorporation and the |
| clore me, a Notary Pub ppeared BILL M | M. SHAW |) take acknowledgements in the State and | dictes of Incorporation and the |
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| clore me, a Notary Pub ppeared BILL M nown to me and know cknowledged before me | M. SHAW vn to b. the period that he | | rticles of Incorporation, and who tion. I County aforesaid, this 15th |
| COUNTY OF HILLS clore me, a Notary Pub ppeared BILL M nown to me and know cknowledged before me N WITNESS WHEREO ay of Time | M. SHAW The port of the period to the period of the perio | | rticles of Incorporation, and who |
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| DOUNTY OF HILLS clore me, a Notary Pub ppeared BILL M nown to me and know cknowledged before me N WITNESS WHEREO ay of Turle (Nota | whice authorized to to the state of the stat | iske acknowledgements in the State and son(\$) who executed the foregoing Are executed these Articles of Incorporal affixed my hand and seal, in the State and (Noticery Public, State of Florida at | County aforesaid, this 15+6 |

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

| HAIR | BY | к.Р., | INC. |
|------|----|----------|----------|
| (na | me | of corpo | pration) |

Pursuant to Florida Statutes Sections 48.091 and 607.034, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

550 N. REO STREET TAMPA, FL. 33609-1013 BILL M. SHAW located at the aforesaid address, as its Registered Agent to accept service of process

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)

within this state.