P95000064940

DIVISION OF CORPERATIONS DEPARTMENT OF STATE P.O. BOS 6327 TALLAHASSEE FL. 32314. DATE -7-15-95

DEAR SIR /MADAM,

ENCLOSED PLEASE FIND ARTICLES OF INCORPERATIONS FOR THE 'M.J.
ENTERPRISES INC, . ALONG WITH A CHECK IN THE AMOUNT OF 122.50 . THE DOLLARS
AS DESCRIBED ARE FOR THE FILING FEES AND DESIGNATION OF REGISTERAD
AGENT WHOM NAME IS -------MICHEL JOHNSON .

ALSO, I HAVE ENCLOSED TWO COPIES OF THE ARTICLES. PLEASE RETURN ONE SET TO ME WITH THE FILING DATE STAMPED ON IT.

THANKS AND REGARDS,

\$500,000,1 \$540,11 55 -07 (\$795-30070)-018 ++++125.50 ++++125.50

RESPECTFULLY.

Michael a Johnson

MICHAEL A. JOHNSON

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AUTHORIZATION BY PHONE TO CORRECT friendly of lusiner DATE 1-18-95

DOCEXAMAGUS Braun

151/2:



FLORIDA DEPARTMENT OF STATE

July 18, 1995

Sandra B. Mortham Secretary of State

MICHAEL A. JCHNSON 513 FITZGERALD DRIVE EATONVILLE, FL 32751

SUBJECT: M.J. INTERPRISES INC.

Ref. Number: W£5000014445

We have received your document for M.J. ENTERPRISES INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned or the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file

When the document is resubn itted, please return a copy of this letter to ensure that your document is properly I andled.

If you have any questions about the availability of a particular name, please call (904) 488-7000.

Please return your document, all ng with a copy of this letter, within 60 days or your filing will be considered abar doned.

If you have any questions concerning the filing of your document, please call (904) 487-6972.

Doris Brown Document Specialist

Letter Number: 995A00034369

ARTICLES OF INCORPORATION

ARTICLE ONE

MICHAEL JOHNSON ENTERPRISES INC

THE NAME OF THIS CORPORATION IS-MICHAEL JOHNSON ENTERPRISES INC.

ARTICLE TWO

THE PERIOD OF ITS DURATION IS PERPETUALITY

ARTICLE THREE

PURPOSE

THIS CORPORATION IF GRANTED CORPORATE STATUS WILL PROVIDE ALL PHASESES OF MARKETING SERVICES, WHEREIN, WE WILL PROVIDE A COMPLETE MARKITING AND SALES TEAM AND MAINTAIN BUSINESSES FOR BOTH THE RETAIL AND WHOLE SALE MARKETS THOUGH OUT THE CONTIGIOUS STATES. THIS CORPORATION WILL PROVIDE OTHER SERVICES RELATED TO THE HAIR-CARE AND BEAUTY INDUSTRY AND ANY OTHER BUSINESS VENTURES FROM TIME TO TIME AS IT MAY SEE FIT, AS PROVIDED FOR BY STATUE.

ARICLE FOUR

THE AGGREGATE NUMBER OF SHARES WHICH THE CORPERATION SHALL HAVE THE AUTHORITY TO ISSUE ARE 2500 AT A PAR VALUE OF ONE DOLLAR EACH.

ARTICLE FIVE

THE CORPERATION WILL NOT COMMENCE ITS BUSINESS UNTIL IT HAS RECEIVED FOR THE ISSUANCE OF SHARES CONSIDERATION OF THE VALUE TWO THOUSAND FIVE HUNDRED DOLLARS.

ARTICLE SIX

THE STREET ADDRESS OF THE INITIAL PRINCIPAL OFFICE IS 618 NO. PINEHILLS ROAD ORLANDO FL. 32808. THE NAME OF THE INITIAL REGISTERED AGENT IS MICHAEL A. JOHNSON .THE ADDRESS OF THE INITIAL REGISTERED AGENT IS 513 FITZGERGALD DR , EATONVILLE FL 32751.

ARTICLE SEVEN

THE NUMBER OF DIRECTORS WHICH WILL CONSTITUTE THE BOARD OF DIRECTORS WILL BEGIN INITIALLY AS ONE. THE NAME AND ADDRESS OF THE PERSON WHOM WILL SERVE AS DIRECTOR IS AS FOLLOWS:

NAME FO DIRECTORS

MICHAEL A. JOHNSON

ADDRESS OF DIRECTORS

513 FITZGERALD DR. LATONVILLE FL. 32751

THE DIRECTOR SHALL HAVE THE POWER TO SET AND DEVELOPE ITS BY-LAWS WITHOUT RESTRICTION OF HIS POWERS CONFERRED BY STSTUS.

ARTICLE NINE

THE NAME AND ADDRESS OF THE INCORPERATOR IS:

CARLTON THOMAS

304 SO. O.B.T. ORLANDO FL.

32805

DATE ._

CARLTON THOMAS

THE DUTIES AND POWERS OF THE INCORPERATOR WILL END AT SUCH TIME AS THE CORPERATION IS GRANTED CORPERATE STATUS.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617 0501, 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:	
	Michael John Comment	

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

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(P.O Box or Mail Drop Box NOT ACCEPTABLE) (P.O HOW I'VE TO \$ 3275/		92 3 3 3	er e
(CITY/STATE/ZIP) 3273			

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) S-23-15 (DATE)