P96000010995

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Taliahassee, FL 32314

700001694537 -01/22/96--01044--012 ****131,25 ****131,25

QUDULU	L. SALES COMPANY, INC.	ulfix)	.*
Enclosed is an original for : [] \$70.00 Filing Foo	and one (1) copy of the articles of \$78.75	incorporation ar X \$131.25 Filing Fao, Cardiad Copy & Cardicate	nd a check
FROM:	LENARD DeLANE Name (printed or typed)		
	3450 SOUTH OCEAN BLVD.	, #323	
	Address		
	PALM BEACH, FLORIDA 33		
	City, State & Zip		
	(407) 586-4850		•
	Daytimo Telephone number	,	126

NOTE: Please provide the original and one copy of the articles.



January 24, 1996

LENARD DELANE 3450 S. OCEAN BLVD., STE. 323 PALM BEACH, FL 33480

SUBJECT: L. DE L. SALES COMPANY, INC.

Ref. Number: W96000001838

We have received your document for L. DE L. SALES COMPANY, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for 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 resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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 (904) 487-6924.

Preted Document Guerhad

Sharon Tala Document Specialist Supervisor

Letter Number: 196A00003139

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

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L. de L. COSMETICS SALES, INC.

ARTICLE II PRINCIPAL OFFICE

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

3450 SOUTH OCEAN BOULEVARD #323 PALM BEACH, FLORIDA 33480

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LENARD DeLANE
3450 SOUTH OCEAN BOULEVARD #323
PALM BEACH, FLORIDA 33480

ARTICLE V INCORPORATORIS)

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

LENARD DOLANE
3450 SOUTH OCEAN BOULEVARD #323
"ALM BEACH, FLORIDA 33480

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

dighteenth day of January 1996.

Leward Wignature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED COMPORATION, 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:_	L. de L.	COSMETICS	SALES,	INC.	
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•		·····	., ., , , 	5. G	
2. The name and address of the reg	Istered age	nt and office Is:		id a	
LENARD DeLANE					بار د کار
	(Name)			3.0	
3450 SOUTH OCEA	N BOULEVA	RD #323			
(P.O.	Box not acc	eptable)	··· ··································		
PALM BEACH, FLO	RIDA 3348	0			
<u> </u>	(City/State/Zip)}			

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 agenty.

(Signature)

(Date)