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96 FEB 23 PH 3:45

SECRETARI DE STATE TALLAHASSEE, FLORIDA

300001712623 -02/12/96--01078--012 ****122.50 ****122.50

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

SUBJECT: SereniCare Inc.							
Ţ,	Proposed corporate	nama - must include sul	fix)				
Enclosed is an origina	I and one (1) co	opy of the articles o	f incorporation	and a check			
∰ \$70.00 Filing Fee	\$78.75 Filing Fae & Cardficate	\$122.00 Filling Fau & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required	w46-3 5			
FROM:	Miner	res Rios					
	Name	Name (printed or typed)					
1450 S.E. Bayshore Drive, Suite				1605			
	Miami, F.	Miami, Florida 33131					
	371-3327						
	Daytime	Daytime Telephone number					

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





February 15, 1996

MIRENES RIOS 1450 S.E. BAYSHORE DRIVE, SUITE 1605 MIAMI, FL 33131

SUBJECT: SERENICARE INC. Ref. Number: W96000003526

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

The entity name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved entity. Names of administratively dissolved entities are not available for one year from the date of administrative dissolution unless the dissolved entity provides the Department of State with a notarized affidavit executed as required by section 607.0120, 617.01201, 608.5135 or 608.4482 Florida Statutes, permitting the immediate assumption or use of the name by another entity.

Simply adding "of Florida" or "Florida" to the end of a name does not constitute a difference.

When the document is resubmitted, please return a copy of this letter to ensure proper handling.

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) 487-6927.

Kathy Hyman Document Specialist

Letter Number: 496A00006712

ARTICLES OF INCORPORATION

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96 FEB 23 PH 3: 4

SECRETARY OF STATE TALLAMASSEE, FLORIDA 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: Botanical Serenicare Inc.

ARTICLE II PRINCIPAL OFFICE

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

1450 S.E. Bayshore Drive, Suite 1605

Miami, Florida, 33131

ARTICLE III SHARES

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

Twenty-five thousand (25,000) shares of stock having a par value of \$.01 (one cent) per share, all of the same class.

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and address of the initial registered agent is:

Mirene Rios, 1450 S.E. Bayshore Drive, Suite 1605 Miami, Florida, 33131

ARTICLE V INCORPORATOR(S) See instructions for officers/directors

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

Minene Rios, 1450 S.e. Bayshone Drive, Suite 1605, Miami, Fla 33131

Martin Paiva, 1450 S.E. Bayshone Drive, Suite 1605, Miami, Fla, 33131

Diego Paiva, 1450 S.E. Bayshone Drive, Suite 1605, Miami, Fla, 33131

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

Signature

Pieco Taira

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

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i.	The name of the corporation is:	Botanical SeroniCare Inc.	FILED R 73 R
2.	The name and address of the regi	5	
	M.i.	nene Rios	
		(Name)	
	1450 S. (P.O. E	E. Bayshone Drive, Suite 166 Box or Mail Drop Box NOT ACCEPTABLE)	05
	Miam	i, Florida 33131	
		(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 agent.

(SIGNATURE) Jehruar, 8,994