P96000018188

TRANSMITTAL LETTER

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

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ ________.

700001724017 -02/26/96--01061--009 ****131.25 ****131.25

FROM:

MAGNOLIA WILLINGHAM
Name

17262 NW 60 CT

Address
. MIAMI Lakes, FC 33015-4668
City, State, & Zip
(305) 8279837
Telephone Number

FILED

96 FEB 26 PM 2: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA

AL FEB 2.7.1995

Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

FILED

<u>QE</u>

96 FEB 26 PH 2: 29

It's ALC About You Beauty and Health LABOR STATING

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:

It's ALL About You Beauty and Health Resort, Inc.

ARTICLE II PRINCIPAL OFFICE

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

17262 NW 60 CT Mismi Lakes, PC 33015

ARTICLE III CAPITAL STOCK

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

1000 shares at a par value of .001

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

MAGNOCIA WILLINGHAM 17262 NW 60 CT Miani Lakes, Fe 33015-4668

ARTICLE V INCORPORATOR(S)

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

Magnolia Willingham Mark Manroe 17262 NW 60 CT HiAmi Lakes, Fl 32015-4668

The undersigned has(have) exe	ecuted these Articles (of Incorporation this	
15 ⁺¹ day of _	February		
	Malnolia	ature/Title	- (President
	Signa	ature/Title	Vice President
	Signa	ature/Title	11001400
	Sign	ature/Title	

CERTIFICATE OF DESIGNATION 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.

2. The name and address of the registered agent and office is: . Magno Lin- Willing-Mann	1. The name of the corp	The name of the corporation is: It's ALL About You
MIGNALIA- WILLIAGINAM (NAME) /7262 NW LO CI (P.O. BOX NOT ACCEPTABLE) MIANUL Laker, FC 33015-4668 (CITY/STATE/ZIP) SIGNATURE Malnela Weller (COTPORTE OFFICER) TITLE PRESIDENT DATE Feb. 15, 1996 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 STATUSES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POS TION AS REGISTERED AGENT.		Beauty and Health Resorct, INC
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 POS TION AS REGISTERED AGENT.	2.	The name and address of the registered agent and office is:
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 POS TION AS REGISTERED AGENT.		MAGNOLIA-WILLIAM
SIGNATURE (CORPORATE OFFICER) TITLE F. L. 15, 1996 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 POS TION AS REGISTERED AGENT.		172CZ NW GO CT SEE TO
SIGNATURE (CORPORATE OFFICER) TITLE F. L. S., 1996 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 POS TION AS REGISTERED AGENT.		(P.O. BOX NOT ACCEPTABLE)
SIGNATURE (CORPORATE OFFICER) TITLE F. L. 15, 1996 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 POS TION AS REGISTERED AGENT.		MIAMI Lakes, FC 33015-4668 19 3 3.6
SIGNATURE (CORPORATE OFFICER) TITLE F. L. 15, 1996 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 POS TION AS REGISTERED AGENT.		(CITY/STATE/ZIP)
SIGNATURE (CORPORATE OFFICER) TITLE F. L. S., 1996 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 POS TION AS REGISTERED AGENT.		> Dr. w
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 POS TION AS REGISTERED AGENT.		
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 POS TION AS REGISTERED AGENT.		SIGNATURE Mahalea Wellel
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 POS TION AS REGISTERED AGENT.		(corporate officer)
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 POS TION AS REGISTERED AGENT.		C 1 1 1000
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 POS TION AS REGISTERED AGENT.		DATE F-cb. /5, /776
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.		
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 POS TION AS REGISTERED AGENT.	L	AVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF
AND AGREE TO ACT IN THIS CAPACITY. THURTHER 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.	_	BOOKER FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN
FORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.		AID AODER TO ACT IN THIS CAPACITY I FURTHER AGREE TO COMPLET WITH THE
TIONS OF MY POSITION AS REGISTERED AGENT.	_ C	ORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE COLIGA-
SIGNATURE Matrolia Willy DATE 2-15-96	Ť	TIONS OF MY POS TION AS REGISTERED AGENT.
DATE		SIGNATURE Motroles Willy
		DATE 2-15-96

P96000018188

MAGNOCIA 17262 NU MIAMI LARGE	WILLINGHAM 1 60 CT 25, PC 3301:	5-4668	Office Use Only	
(305) [77-9	(23.)	R(S), (if	known):	
1(Cor	noration Name)	(Document #)		
		, ,		
(Cor	poration Name)	(Document #)		
3(Cor	poration Name)	(Document #)	900001793 -0472479601102- *****35.00 ****	3548 013
А		, ,	*****35.00 ****	# 35. 00
(Cor	poration Name)	(Document #)	·	
□ _{Walk in} [Pick up time	□ comit	ied Copy	
			icate of Status	
NEW FILINGS	AMENDMEN	rs in the second		
Profit	Amendment W	<u> </u>	95 N	5
NonProfit	Resignation of R.A.		75 SEC. 1815))
Limited Liability	Change of Registere		5/ 2 3	113 123
Domestication	Dissolution/Withdra	iwal	SH Z R	Ö
Other	Merger		- SA	
OTHER FILINGS	PREGISTRA	TION/S	Sign Sign	
Annual Report	REGISTRAT	TION		
Fictitious Name	Foreign			
Name Reservation	Limited Partnership			
2 - Marie 120001 70110/11	Reinstatement		•	
	Trademark			
	Other			

CR2E031(1/95)

Examiner's Initials

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF

Or	ិក ១០	
It's ALL ABOUT YOU.		
BEAUTY AND HEALTH RESORT, INC.	二 二 2	1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S
(present name)	— o	Êi

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

FIRST Step ACADEMY, INC.

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD:	The date of each amendment's adoption: 1976.		
FOURTH: Adoption of Amendment(s) (CHECK ONE)			
ĝ	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.		
	The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):		
	"The number of votes cast for the amendment(s) was/were sufficient		
	for approval by		
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.		
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.		
Signed this			
	(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)		
	OR		
	(By a director if adopted by the directors)		
	OR		
	(By an incorporator if adopted by the incorporators)		
	MAGNOLIA WILLINGHAM Typed or printed name		
	PRESIDENT Title		

. . .