

P96000030044

TRANSMITTAL LETTER

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

100001765011
-04/01/96--01080--004
*****70.00 *****70.00

SUBJECT: Colorlab Cosmetics Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of Incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

Kathleen Schilling
Name (printed or typed)

2945 NE 19th St

Address

Pompano Beach, FL 33062

City, State & Zip

954-970-8620

Daytime Telephone number

TALLAHASSEE, FLORIDA

96 APR -1 PM 2:35

FILED

called Kathleen,
added Cosmetics
in last page.

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

ARTICLES OF INCORPORATION

FILED
96 APR - / PM 2:35
TALLAHASSEE, 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:

Colorlab Cosmetics Inc.

ARTICLE II PRINCIPAL OFFICE

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

2945 NE 19th St
Pompano Beach, Fl. 33062

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Kathleen Schilling
2945 NE 19th St
Pompano Beach, Fl. 33062

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):

Kathleen Schilling
2945 NE 19th St.
Pompano Beach, FL 33062

Mary Swabb
4139 Oak Lane
Rockford, Ill. 61109

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

22 day of March, 1996.

(An additional article must be added if an effective date is requested.)

Kathleen Schilling
Signature

Signature

Signature

Notarization is not required

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.

1. The name of the corporation is:

Colorlab Cosmetics Inc.

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

Kathleen Schilling
(NAME)

2945 NE 19th St

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Pompano Beach, Fl. 33062
(CITY/STATE/ZIP)

TALLAHASSEE, FLORIDA
MAR 22 - 1 PM 2:35

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.

Kathleen Schilling
(SIGNATURE)

3/22/96
(DATE)

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