1960 THANMITTALLETTER 5

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

SUBJECT: Pro Nail Academy, Incorporated

(Proposed corporate name - must include suffix)

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

X \$78.75 Filling foo & certificate

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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: Pro Nail Academy, Incorporated

ARTICLE II PRINCIPAL OFFICE

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

1880 Queens Court, Kissimmee, FL 34744

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 2,000 shares of common stock at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the registered agent is:

Barbara Reitz 1880 Queens Court Kissimmee, FL 34744

ARTICLE V INITIAL CORPORATE OFFICERS

The names and addresses of the Corporate Officers of the Corporation are:

- 1. President, Barbara Reitz, 1880 Queens Court, Kissimmee, FL 34744
- 2. Vice-President, Kim Anh Kitterman, 525 Eagle Circle, Casselberry, FL 32707

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation is:

Barbara Reitz, 1880 Queens Court, Kissimmee, FL 34744

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

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE の	-11
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDS SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGIONAL IN THE STATE OF FLORIDA.	THE DEREC
I. The name of the corporation is: Pro Nail Academy, Incorporated	
the name and address of the registered agent and office is:	
Barbara Reitz	
(Name)	
1880 Queens Court	
(P.O.Box not acceptable)	
Kissimmee, Florida 34744	
(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) (Date)