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TRANSMITTAL LETTER

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

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-07/01/96--01052--011
****122.50 ****122.50

SUBJECT: IMPRESSIONS BY MILLY ALTAPELUQUERIA, CORP.
(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 ☐ \$78.75 ☒ \$122.50 ☐ \$131.25

FROM: Gabriel Tamarez
Name (printed or typed)
6691 Pembroke Rd Suite 3
Address
Pembroke Pines, Fl. 33023
City, State & Zip
(954) 981-8384
Daytime Telephone number

FILED
96 JUL - 1 AM 9:28
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

IMPRESSIONS BY MILLY ALTAPELUQUERIA, CORP.

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:

IMPRESSIONS BY MILLY ALTAPELUQUERIA, CORP.

ARTICLE II PRINCIPAL OFFICE

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

6691 Pembroke Rd, Suite #3, Pembroke Pines, Fl. 33023

ARTICLE III SHARES

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

100 shares of \$1.00 each.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Gabriel Tamares, 6691 Pembroke Rd, Suite 3, Pembroke Pines,
Fl. 33023

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ARTICLE V INCORPORATOR(S)

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

Gabriel Tamarez

6691 Pembroke Rd. Suite 3
Pembroke Pines, FL 33023

Milechys T. Tamarez

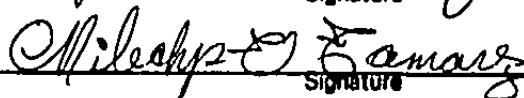
6691 Pembroke Rd. Suite #3
Pembroke Pines, FL 33023

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

21st day of June, 1996.



Signature



Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

IMPRESSIONS BY MILLY ALTAPELUQUERIA, CORP.

1. The name of the corporation is: _____

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

Gabriel Tamarez

(NAME)

6691 Pembroke Rd.

(P.O. BOX NOT ACCEPTABLE)

Pembroke Pines, Fl. 33023

(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

Gabriel Tamarez

DATE

June 21, 1996

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JUL -1 AM 9:28
TALLAHASSEE
FLORIDA