P960-AMARIA 771340

Uppartment of State Divisions of Corporations P.O. Box 6327 Tallahussee, FL 32314

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SUBJECT: Salon Antonio, Inc.

(Proposed corporate name - muse include suffix)

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

Filing Fee

____ \$78.75 Filing Fee X \$122.50 Filing Fee

\$131,25

& Certificate

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Robert L. Braun

Name (printed or typed)
OLYMPUS FINANCIAL SERVICES CORP.
725 N. Highway A1A, Suite A-103

Address

Jupiter, FL 33477

35 AUG 23 PH

City, State & Zip

561-743-7706

Daytime Telephone Number

AUG 27 1996

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

ARTICLE OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming 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:

Salon Antonio, Inc.

ARTICLE II PRINCIPAL OFFICE

Salls 3 Parties

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

2105 South U.S. 1 Jupiter, FL 33477

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Antonio Cioffi 2105 South U.S. 1 Jupiter, FL 33477

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Antonio Cioffi 2105 South U.S. 1 Jupiter, FL 33477

l'he under 26 t.h	signed incorporator(s) has (have) executed these Articles of Incorporation this day ofJuly
20011	day of <u>July</u> , 19 <u>96</u> .
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	Luberio Creff
	Antonio Cioffi Signature
	Signature
	Signature
	Digitature

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

0 491		
2. The name i	and address of the registered agent and office is:	4 9 3
	Antonio Cioffi (Name)	
	2105 South U.S. 1	16 13 13 13 13 13 13 13 13 13 13 13 13 13
'	(P.O. Box or Mail Drip Box: NOT: ACCEPTABLE)	Free PH
<i>:</i>	Jupiter, FL 33477	# 19 W
	(CITY/STATE/ZIP)	. O

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) 07/26/96 (DATE)