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MIRACLE MASK, INC.

4435 NW 84TH AVENUE
CORAL SPRINGS, FL 33065

SEPTEMBER, 3 1996

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-09/10/96--01029--008
*****70.00 *****70.00

Secretary of State
Capitol Building
Tallahassee, Florida
32304

Attention: Corporation Division

RE: MIRACLE MASK, INC.

Dear Sir:

Please accept for filing, the Articles of Incorporation and the Resident Agent form which designates the Resident Agent for the above-captioned corporation. Enclosed is our check in the amount of \$70.00 to cover the following fees:

Filing Original Articles of Incorporation	\$ 35.00
Resident Agent Fee	<u>35.00</u>
Total	\$ 70.00

Cordially,

Michelle Marsh

MICHELLE MARSH

FILED
96 OCT -2 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pmc
9.20.96

624



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 9, 1996

MICHELLE MARSH
4435 NW 84TH AVENUE
CORAL SPRINGS, FL 33065

SUBJECT: MIRACLE MASK, INC.
Ref. Number: W96000018808

We have received your document for MIRACLE MASK, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6923.

Doris McDuffie
Corporate Specialist Supervisor

Letter Number: 396A00041883



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 20, 1996

MICHELLE MARSH
4435 NW 84TH AVENUE
CORAL SPRINGS, FL. 33065

SUBJECT: MIRACLE MASK, INC.
Ref. Number: W96000018808

We have received your document for MIRACLE MASK, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6923.

Doris McDuffie
Corporate Specialist Supervisor

Letter Number: 396A00041883

CERTIFICATE OF INCORPORATION
-OF-

MIRACLE MASK, INC.

The undersigned, for the purpose of forming a corporation
under the Florida General Corporation Act, hereby adopts the
following Articles of Incorporation:

ARTICLE I. NAME

The name of this corporation is MIRACLE MASK, INC.

ARTICLE II. DURATION

The term of existence of the corporation is perpetual.

ARTICLE III. PURPOSE

The corporation may transact any and all lawful business for
which corporations may be incorporated under the Florida General
Corporation Act.

ARTICLE IV. CAPITAL STOCK

The aggregate number of shares which the corporation has
authority to issue is 1,000,000 all of which shall be common
shares with par value of \$0.01.

ARTICLE V. REGISTERED OFFICE

The street address and mailing address of the principal place
of business is 4435 NW 84TH AVE, CORAL SPRINGS, FL 33065, and the
street address of the initial registered office of the corporation
is 4435 NW 84TH AVE, CORAL SPRINGS, FL 33065 and the name of the
initial registered agent is MICHELLE MARSH.

ARTICLE VI. DIRECTORS

The Board of Directors of the corporation shall consist of
two members, but may be increased or decreased by a resolution of
the Board of Directors adopted in the manner provided in the
Bylaws of the corporation, provided that in no event shall the
Board of Directors consist of less than one member.

The names and addresses of the Directors which constitutes
the first Board of Directors of the Corporation is:

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96 OCT -2 AM 10:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAME
MICHELLE MARSH

ADDRESS
4435 NW 84TH AVENUE
CORAL SPRINGS, FL 33065

COLEEN SPERANZA

4435 NW 84TH AVENUE
CORAL SPRINGS, FL 33065

ARTICLE VII. INCORPORATORS

The name and address of the incorporator of the corporation is:

NAME
MICHELLE MARSH

ADDRESS
4435 NW 84TH AVENUE
CORAL SPRINGS, FL 33065

IN WITNESS WHEREOF, the undersigned have subscribed their names this 3 day of 9 1996.

Michelle Marsh
MICHELLE MARSH

Coleen Speranza
COLEEN SPERANZA

STATE OF FLORIDA)

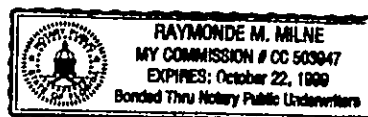
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COUNTY OF BROWARD)

On this 3 day of 9 1996, before me, the undersigned officers, personally appeared MICHELLE MARSH and COLEEN SPERANZA, known to me to be the persons whose names are subscribed to the within instrument, and acknowledged that they executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

Raymonde M. Milne
NOTARY PUBLIC, STATE OF
FLORIDA AT LARGE



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96 OCT -2 AM 10:55

SEC. OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

SECRETARY OF STATE

Certificate Designating Place of Business or Domicile for the Service of Process Within This State, Naming Agent Upon Whom Process May Be Served and Names and Addresses of the Officers and Directors.

MIRACLE MASK, INC.

The following is submitted, in compliance with Chapter 48.091, Florida Statutes:

MIRACLE MASK, INC., a corporation organized under the laws of the state of Florida, with its principal office at 4435 NW 84TH AVE, CORAL SPRINGS, FL 33065 has named MICHELLE MARSH, located at 4435 NW 84TH AVE, CORAL SPRINGS, FL 33065, county of BROWARD, as its agent to accept service of process within this state.

<u>OFFICERS</u>	<u>TITLES</u>	<u>SPECIFIC ADDRESSES</u>
MICHELLE MARSH	President/Dir	4435 NW 84TH AVENUE CORAL SPRINGS, FL 33065
COLEEN SPERANZA	Sect/Treas	4435 NW 84TH AVENUE CORAL SPRINGS, FL 33065

ACCEPTANCE

I agree as Resident Agent to accept Service of Process: to keep this office open during prescribed hours, to post my name (and any other officers of said corporation authorized to accept service of process at the above Florida designated address) in some conspicuous place in the office as required by Law.

DATED: 9-3-96


MICHELLE MARSH
Resident Agent