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TRANSMITTAL LETTER

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

EFFECTIVE MITE The Final Touch of Jacksonville, Inc. SUBJECT: _ (Proposed corporate name - must include suffix) -12/05/96--01057--001 ******78.75 *****78.75 Enclosed is an original and one (1) copy of the articles of incorporation and a check for: x \$78.75 \$131.25 \$70.00 \$122.50 Filing Fee & Certified Copy Filing Fee, Certified Copy Filing Fee Filing Fee & Certificate & Certificate Additional Copy Required Geraldine T. Scaife FROM: Name (printed or typed) 96 DEC -5 PH 4: 02 1415 Windsor Place Address Jacksonville, Florida 32205 City, State & Zip (904) 384-6131 Daytime Telephone number

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



ARTICLES OF INCORPORATION

SECRETARY OF STATE

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business E Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

The Final Touch of Jacksonville, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1415 Windsor Place Jacksonville, Florida 32205

ARTICLE III SHARES

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

One Thousand.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Geraldine T. Scaife 1415 Windsor Place Jacksonville, Florida 32205

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):

Geraldine T. Scaife 1415 Windsor Place Jacksonville, Florida 32205

ARTICLE VI EFFECTIVE DATE

The effective date for these articles of Incorporation shall be January 1, 1997.

The unde	ersigned in	corporator(s) has(h	ave) executed these Articles of In	corporation th
3rd	day of _	December	, 19 <u>96</u>	
(An addit	ional artic	le must be added if	an effective date is requested.)	
	4	Gersldin	J. Scaife 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 i	name of the corporation is:The_Final	1 Touch of Jacksonville, Inc.
2. The	name and address of the registered agent and	office is:
		78 98 H
	Geraldine T. Scaife	CRET
	(Name)	ASS -5
	1415 Windsor Place	
	(P.O. Box or Mail Drop Box	NOT ACCEPTABLE)
	Jacksonville, Florida	32205 BA &
	(CITY/STATE	E/ZIP)
corpora agent ar relating	tion at the place designated in this certificate, nd agree to act in this capacity. I further agr	ccept service of process for the above stated , I hereby accept the appointment as registered ree to comply with the provisions of all statutes by duties, and I am familiar with and accept the
He	aldine I. Scaife	December 3 1996
	(SIGNATURE)	(DATE)