P97000017409 TRANSMITTAL LETTER

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

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|-----------------------|------------------|------------------------------------|-------------------------------------|--------------------------------------|-----------------|---|----------|
| SUBJECT: | Golden | | | Center, | | | |
| | | (Prop | osed corpor | ate name - mi | ist include suf | fix) | |
| | | | | | | | |
| | | | | | | | |
| Enclosed is an o | riginal and one(| l) copy of | the article | s of incorpo | ration and a | check for: | _ |
| ☑ \$70.0 Filing Fo | ee F | □ \$78.75 Filing Fee & Certificate | | Filing Fee Fi & Certified Copy Co | | \$131.25 Filing Fee, Certified Copy & Certificate | |
| | | | | ADDIT | IONAL CO | PY REQUIRED | |
| FROM: | Кау | | ngling | | | Ā., S | , |
| | | Na | SECRI ALLAI | 1 | | | |
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| | | | 143-4 | | | | |
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Daytime Telephone number

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:

Golden Touch Beauty Center, Inc.

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ARTICLE II PRINCIPAL OFFICE

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

12576 SW 88 Street Miami, FL 33186

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Kay M. Tingling Smith 11539 SW 90 Street Miami, FL 33176

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):

Kay M. Tingling Smith

| The und | ersigned in | ncorporator(s) ha | is(have) exec | uted these Ar | ticles of Inc | orporation thi |
|-----------|-------------|-------------------|---------------|----------------|---------------|----------------|
| 19th | day of _ | February | | , 19 <u>97</u> | ' | |
| (An addit | ional artic | le must be adde | if an effecti | ve date is req | uested.) | |
| | | | Kay | Autho | > | |
| | | | | Signature | | |
| | | | \$ | Signature | | |
| | _ | | S | ignature | ············ | |

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

97 FEB 20 PM 2: 47

TALLAHASSEE, FLORIDA

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 name of the corporation is Golden Touch Beauty Center. Inc. |
|----|---|
| | |
| 2. | The name and address of the registered agent and office is: |
| | Kay M. Tingling Smith |
| | (NAME) |
| | 11539 SW 90 Street |
| | (P. O. Box or Mail Drop Box NOT ACCEPTABLE) |
| | Miami, FL 33176 |
| | (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.

Kay Inthe 2/19/97
(SIGNATURE) (DATE)