## P97000028497

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

500002124365--5 -03/26/97-01019-005 \*\*\*\*131.25

SUBJECT:  Enclosed is an original	FACIAL Accents: (Proposed corpola		AR 26 PH 2:	E
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy  ADDITIONAL COP	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	SARITA RINER Name (Printed  2307 MOUND AT  Addre  PANAMA CITY, F  City, State  904-784-948  Daytime Teleph	IENUE ss - <u>Lorida</u> 32405 & Zip		

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

P. MYCEROLER

MAR 2 8 1997

## 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:

FACIAL Accents, Inc.

97 MAR 26 PH 2: 58

ARTICLE II PRINCIPAL OFFICE

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

2307 MOUND AVENUE PANAMA CITY, FLORIDA

32405

ARTICLE III SHARES

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

one hundred

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SARITA RINER 2307 MOUND AVENUE PANAMA CITY, FLURIDA 32405

## 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):

JARITA Riner 2307 MOUND AVENUE Panama City, Florida 32405 John T. Riner 2301 Mound AVENUE Panama City, FLORIDA 32405

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

(An additional article must be added if an effective date is requested.)

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 name of the corporation is Facial Accents Inc.	
	97 M
2. The name and address of the registered agent and office is:	HAR 26 PM
Sarita River	R 26 PM 2: 58 HASSEE, FLORIDA
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	
Panama City, Florida 32405	
(CHYSIAIDZIP)	

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.

Santa Rines 3-24-97
(SIGNATURE) (DATE)