P97000060889 TRANSMITTAL LETTER

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

800002235628--9 -07/11/97--01028--008 *******78.75 ******78.75

Shaving Enjoyment Corp. SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$122.50 \$131.25 \$70.00 Filing Fee Filing Fee Filing Fee, Filing Fee & Certificate & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED Walter Karnatz FROM: Name (Printed or typed) 1332 Citrus Isle Address Fort Lauderdale, FL 33315 City, State & Zip (954) 524-5081

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

Daytime Telephone number

FILED

ARTICLES OF INCORPORATION

97 JUL 1 1 PM 12: 28

SECRE TARY OF STATE
The undersigned incorporator, for the purpose of forming a corporation under the Electrical SEE. FLORIDA
Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Shaving Enjoyment Corp.

ARTICLE II PRINCIPAL OFFICE

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

1332 Citrus Isle

Fort Lauderdale, FL 33315

ARTICLE III SHARES

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

1000 (One Thousand)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Walter Karnatz 1332 Citrus Isle Ft. Lauderdale, FL 33315

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Walter Karnatz 1332 Citrus Isle Ft. Lauderdale, FL 33315

Stor France

Signature/Incorporator

7-1-97

Date

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

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/Registered Agent

7-1-97

Date