TRANSMITTAL LETTER Department of State Division of Corporations

P. O. Box 6327 Tallahassee, FL 32314

300002253053--6 -07/30/97--01103--015 ****131.25 ****131.25

SUBJECT: HAIR TO PARADISE

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee **378.75**

Filing Fee

& Certificate

\$122.50

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: VIRGINIA STEIN MAN Name (Printed or typed)

2980 RIVERSIDE DR #224

Address

CORAL Springs FLA 33065

City, State & Zip

954- 782- 8580 Daytime Telephone number

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

ARTICLES OF INCORPORATION

FILED 97 JUL 30 Pt 4: 12

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

HAIR TO PARADISE II Inc.

<u>ARTICLE II</u> PRINCIPAL OFFICE

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

807 WEST SAMPLE RD. POMPANO BEACH FL 33064

ARTICLE III SHARES

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

100 SHARES

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

UIRGINIA STEINMAN 2980 RIVERSIDE DR #224 CORA C SPRINGS FLA 33065 ARTICLE V INCORPORATOR

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

VIRGINIA STEINMAN
2980 RIVERSIDE DR # 224
COPAC SPRINGS FLA

VIGURE STEINGS FLA

33065

VIGURE STEINGS FLA

33065

(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

1-21-97