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ACCOUNT NO. : 072100000032

REFERENCE: 492245 7122803

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: August 11, 1997

ORDER TIME : 10:48 AM

ORDER NO. : 492245-005

CUSTOMER NO: 7122803

08/11/97- 01089--017 ****122.50 ****122.50 CUSTOMER: Kent A. Skrivan, Esq SULLIVAN & SKRIVAN

800 Laurel Oak Drive, Ste 200

Naples, FL 34108

DOMESTIC FILING

NAME: SKIN THERAPY BY DONNA, INC.

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EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Warren Whittaker

EXAMINER'S INITIALS:



ARTICLES OF INCORPORATION

OF

SKIN THERAPY BY DONNA, INC.

The undersigned incorporator, for the purpose of forming a corporation under the laws of the State of Florida, hereby adopts the following Articles of Incorporation.

ARTICLE I

NAME

The name of the Corporation is SKIN THERAPY BY DONNA, INC.

ARTICLE II

PRINCIPAL OFFICE; MAILING ADDRESS

The address of the principal office of the Corporation is Park Square, 4085 Tamiami Trail North, Suite B-204, Naples, Florida 34103.

The mailing address of the Corporation is Park Square, 4085 Tamiami Trail North, Suite B-204, Naples, Florida 34103.

ARTICLE III

PURPOSE

The purpose for which the Corporation is organized to engage in the business of skin care and therapy, and for all other lawful purposes allowed a Florida corporation.

ARTICLE IV

DURATION

The Corporation shall have a perpetual existence commencing from the date of filing these Articles of Incorporation.

ARTICLE V

DIRECTORS

The method by which Directors of the Corporation shall be

elected is set forth in the ByLaws. The initial Board of Directors shall consist of one member. The name and address of the initial Director is:

Donna Forsythe 6060 14th Ave. SW Naples, Florida 34116.

ARTICLE VI

CAPITAL STOCK

The Corporation is authorized to issue 7,500 shares of One Dollar Par value Common Stock.

ARTICLE VII

INITIAL REGISTERED AGENT AND ADDRESS

The name of the initial registered agent for the Corporation is N. PAUL SAN FILIPPO. The address of the registered agent is 2150 Goodlette Road, Suite 305, Naples, Florida 34102.

ARTICLE VIII

INCORPORATOR

The name and street address of the incorporator is as follows:

Donna Forsythe 6060 14th Ave. SW Naples, Florida 34116.

IN WITNESS WHEREOF, the incorporator, DONNA FORSYTHE, has signed these Articles of Incorporation for the purpose of forming the Corporation under the laws of the State of Florida, this _7_ day of August, 1997.

DONNA FORSYTHE, Incorporator

STATE OF FLORIDA COUNTY OF COLLIER

The attached or foregoing instrument was acknowledged before me this Maday of August, 1997, by DONNA FORSYTHE, who is personally known to me or who produced a driver's license as

identification and who did take an oath.

**Notary Public Commission Expiration: 8/27/00

REGRIAN F, AERERY Footony Public - Boto of Frontia y Commission Biggins Aug 27, 2000 Commission & CC200163

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT AND OFFICE

Pursuant to the provisions of Section 607.0501 of the Florida Business Corporation Act, the undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating its registered office and registered agent in the State of Florida.

- 1. The name of the Corporation is SKIN THERAPY BY DONNA, INC.
- 2. The name and address of the registered agent and registered office of the Corporation is:

N. PAUL SAN FILIPPO 2150 Goodlette Road, Suite 305 Naples, Florida 34102

Signed this _____ day of August, 1997,

: DAMAN COSTIN

____⊦

REGISTERED AGENT ACCEPTANCE

Having been named as Registered Agent and to accept service of process for the above stated Corporation at the place designated in the 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 I am familiar with and accept the obligations of my position as Registered Agent.

Paul San Fi

Date: 8/7/97

L.S.

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