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Req	uestor's Name		
	obert Gruppo		
West Palm Beach, FL 33414		20000 2 49 7 -04/23/98 ******70.00	76522 01042-010 *****70.00
City/State/2	ip Phone #	Office Use Only	
CORPORATION I	NAME(S) & DOCUMENT NUMB	BER(S), (if known):	
1.			
(Corpo	oration Name) (Doc	ument #)	
2(Corpo	oration Name) (Doc	ument #)	
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3. <u>(Corpo</u>	pration Name) (Doc	ument #)	
4.			
(Corpo	oration Name) (Doc	ument #)	
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☐ Walk in	Pick up time	Certified Copy	
☐ Mail out ☐	Will wait Photocopy	Certificate of Status	
NEW FILINGS	AMENDMENTS	The state of the s	
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/ Director		98 ∑ #
Limited Liability	Change of Registered Agent		
Domestication.	Dissolution/Withdrawal		PARTIE
Other	Merger		
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OTHER FILINGS	REGISTRATION/		OF STATE ORPORATIONS
Annual Report	QUALIFICATION		Ž,
Fictitious Name	Foreign		
Name Reservation	Limited Partnership		
	I last in the last of the last		
	Reinstatement		

Other

Examiner's Initials 04 - 24.98

SECRETARY OF STATE OF VISION OF CORPORATIONS

ARTICLES OF INCORPORATION PR APR 23 AM 9: 34

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: Pampered Nails by Louides INC.

ARTICLE II PRINCIPAL OFFICE

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

12940 MEADOW BREEZE DrIVE WEllington, FL. 33414

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Resec+ Coppo

12940 MEADOWBREEZE DrivE

Wellington, FL. 33414

FILING FEE: \$70.00

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):

Lourdes Pineda-Gruppo - President 12940 MEADONBREEZE Drive Wellington, FL 33414

ROBERT Gruppo - Vice President 12940 MEADONBREEZE DINE Wellington, FL. 33414

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

20 day of April , 19 98.

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

Signature
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:	Pampered Nails	by Lourdes lue.
2. The name and address of the regi	stered agent and office is:	
ROBET	ETUPPO (NAME)	98 SIVIC 88
	MEADON BEEZE DIVE ox or Mail Drop Box NOT ACCEPTABLE)	APR 23
Wellingt	(CITY/STATE/ZIP)	LED Y OF STATE CORPORATION

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.

Joles (SymAture) #1-20-98
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314