P980000 61604 TRANSMITTAL LETTER

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

P. O. Box 6327 Tallahassee, FL 32314		₹ ,
1		581 14 07 7/98-01017-001 \$78.75 *****78.75
SUBJECT: CE BARWOOD (Proposed corpora	S AY SPA, INC. ate name - must include suffix	
Enclosed is an original and one (1) copy of the articles of incorporation a	nd a check
for: \$70.00 \$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	
	RMEN A. HERNAN DEZ Name (printed or typed)	
1025	1 EAST CYPRESS COURT Address	~ ~
Pent	GROKE PINES, FLORIDA 330. City, State & Zip	26 Zs e
<u>(954</u>) 450-3375 Daytime Telephone number	B JUL TO
CORNECT GAVE AUTHORIZATION BY PHONE TO CORRECT GAT THE DATE 2-13-28 DOC. EXAM BAR	· 	13 PHI2: 22 HASSEE, FLORID
BAN BAR		>

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

BR 7/7/98 W98-1542D



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 7, 1998

CARMEN A HERNANDEZ 10251 E CYPRESS CT PEMBROKE PINES, FL 33026

SUBJECT: CEDARWOODS DAY SPA, INC.

Ref. Number: W98000015420

Carmen, your document cannot be filed without stock. I am holding your articles in our office so that you can call me with this information.

We regret that we were unable to contact you by phone.

If you have any further questions concerning your document, please call (850) 487-6919.

Beth Register Corporate Specialist Supervisor

Letter Number: 598A00036345

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:

CEDARWOODS DAY SPA, INC.

98 JUL 13 PH 12: 22
SECRETARY OF STATE
SECRETARY OF STATE

ARTICLE II PRINCIPAL OFFICE

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

9125 TAFT STREET Pembroke PINES, FloridA. 33024

ARTICLE III SHARES

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

100 NPV

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CARMEN A- HERNANDEZ 10251 EAST CYPRESS CT. PEMBROE PINES, FLORIDA 33026

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):

CARMEN A. HERNANDEZ
PRESIDENT

10251 EAST CYPRESS COURT. POMBROKE PINES, Fla, 33026

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

1st day of July , 19 98.

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

President

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:	CEBARWOODS	DAY	SpA, INC.	
2.	10251 (P.O. E	Stered agent and office is: 1 EN A. HERNAMSE (NAME) EAST CYPRESS CONTROP BOX NOT ACCEPTABLE (CITY/STATE/ZIP)	ourt E)	98 JUL 13 PH 12: 22 SECRETARY OF STATE TALLAHASSEE, FLORIDA	

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.

(SIGNAZURE) 07/01/98 (DATE)