P980QQQQQQQLGHERYGES

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

SUBJECT:	Hair Designs (Proposed Corpor	ate name - must include suff	ñx)
		(C)	000025931 -07/20/98010 ****131.25
Enclosed is an original ar	nd one(1) copy of the article	s of incorporation and a c	heck for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	Kelvin Name (F	A. Liburd	
	13305 V	<u>v. Dixie Hwy</u> Address	,
	North Mian	ni FL 3310 State & Zip	G / LANA

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

305 - 891 - 4997 Daytime Telephone number

AN 7-23-98

ARTICLES OF INCORPORATION

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

The name of the corporation shall be: Hair Designs 2000 Inc.

ARTICLE II	PRINCIPAL	OFFICE
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The principal place of business and mailing address of this corporation shall be:

13305 W. Dixie Hwy North Miami FL, 33167

ARTICLE III SHARES

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

ONE

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Liburd 13305 W. Dixie Hwy North Miam: PL 33167

INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Kelvin & Marlene Liburd 13305 W. Dixie Hwy North MiAmi FL 33167

Signature/Incorporator

(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