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To: Division of Corporations  
Fax Number : (850) 922-4001

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT CORPORATION OR P.A.**

**LIZ NAILS, INC.**

Certificate of Status	1
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF**

**LIZ NAILS, INC.**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation,

**ARTICLE I NAME**

The name of the corporation shall be: **LIZ NAILS, INC.**

The principal place of business of this corporation shall be:  
**6760 SW 6 ST. MIAMI FLORIDA 33144**

**ARTICLE II NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III CAPITAL STOCK**

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is Five Hundred (500) shares of One Dollar (\$1.00) per value common stock, which shall be designated "Common Shares".

**ARTICLE IV TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successors(s) is (are) elected, is(are):

**IVON DIEZ - PRESIDENT**  
**6760 SW 6 ST MIAMI FLORIDA 33144**

**LISSETTE DIEZ - VICE PRESIDENT**  
**6760 SW 6 ST MIAMI FLORIDA 33144**

Prepared by: **LEGAL SERVICE 2000**  
**7295 W FLAGLER ST**  
**MIAMI FL 33144**  
**(305) 260-0201**

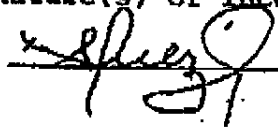
**ARTICLE VI INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

**IVON DIEZ - PRESIDENT  
6760 SW 6 ST  
MIAMI FLORIDA 33144**

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of incorporation this 16 day of September, 1998.

Signature(s) of Incorporator(s)

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, 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:

LIZ NAILS, INC.

2. The name and address of the registered agent and office is:

IVON DIEZ, PRESIDENT  
6760 SW 6 ST

(P.O. BOX NOT ACCEPTABLE)

MIAMI FLORIDA 33144

(CITY/STATE/ZIP)

SIGNATURE X 

TITLE PRESIDENT

DATE 09/16/98

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE 

DATE 09/16/98