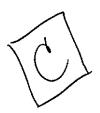
PACTRAINITIAL LETTER 05

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

	•			
SUBJECT: Ae	sthetic Inc.	rate name - must include su	F-0	
	•			
			00002671 -10/23/980 ******70.00	1606 1055019 ******70.00
Enclosed is an original	and one(1) copy of the article	of incorporation and a	check for :	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	☐\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: _	K.L. Cotherman	inted or typed)		l
-	5102 NID 43 1	Denue	TAL	98
-	Coconat Creek.	ft 33073 - 293;	CRETARY O	23
_	954 - 428 - 0119 Daytime Te	lephone number	Or STATE E FLORIDA	



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



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.

ARTICLE I - NAME

The name of the corporation shall be:

Aesthetic, Inc.

ARTICLE II - PRINCIPAL OFFICE

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

5102 Northwest 43 Avenue Coconut Creek, Florida 33073-2932

ARTICLE III - SHARES

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

100 Shares

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

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

K. L. Cotherman 5102 Northwest 43 Avenue Coconut Creek, Florida 33073-2932

ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Kathy Falk Granangs Ringen 8 Tyreso, Sweden 13544

grature/Incorporator

10/14/98 Date 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

1014198 1 Date

980ct 23 PH 1: 45
SECKETARY OF STATE
AND A SSEE FLORIDA