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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

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FROM: EMPIRE CORPORATE KIT COMPANY
CONTACT: RAY STORMONT
PHONE: (305)541-3694

ACCT#: 072450003255
FAX #: (305)541-3770

NAME: MAGICAL MOMENTS AROMAS, INC.
AUDIT NUMBER.....H98000021245
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION
OF
MAGICAL MOMENTS AROMAS, INC.

98 NOV 13 AM 8:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as Incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

1. **Name.** The name of the corporation is MAGICAL MOMENTS AROMAS, INC.
2. **Duration.** The period of duration is perpetual.
3. **Purpose.** The purpose is to sell bath, body and aroma therapy and to engage in any legal activities authorized under the laws of the United States and the state of Florida.
4. **Capital Stock.** The corporation is authorized to issue one hundred thousand shares of common stock at \$.01 par value.
5. **Initial Registered Office and Agent.** The name and address of the initial registered agent and office of this corporation is as follows:

Stanley E. Johnson, Jr.
1444 Biscayne Boulevard, Suite 230
Miami, Florida 33132
6. **Principal Office and Mailing Address.** The initial principal office of this corporation and its initial mailing address is as follows:

Winnifred Wilson
1121 N W 207th Street
Miami, Florida 33169

Document Prepared by:
STANLEY E. JOHNSON, JR., ESQ.
1444 Biscayne Boulevard
Suite 230
Miami, Florida 33132
Tel. (305) 372-2797
Florida Bar No. 472395

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Page 2

7. **Initial Board of Directors.** This corporation shall have one director initially. The number of directors may be either increased or decreased from time to time by an amendment of the bylaws of the corporation in the manner provided by law, but shall never be less than one. The name and address of the initial directors of this corporation are:

Winnifred Wilson
1121 N W 207th Street
Miami, FL 33169

8. **Incorporator.** The name and address of the Incorporator signing these Articles of Incorporation is:

Winnifred Wilson
1121 N W 207th Street
Miami, FL 33169

9. **Amendment of Articles.** This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

10. **Indemnification.** This corporation shall indemnify and may insure its officers and directors to the fullest extent permitted by law as currently in effect or as amended in the future.

11. **Debts of the Corporation.** The private property of the shareholders shall not be subject to payment of the corporate debts in any event.

12. **Conflict of Interest.** This corporation, expressly elects not to be governed by Florida Statutes Section 607.0901 (1997), as amended, relating to affiliated transactions. No contract or other transaction between this corporation and any other corporation, and no act of this corporation, shall in any way be affected or invalidated by the fact that any of the directors of this corporation are pecuniarily or otherwise interested in, or are directors or officers of, such other corporation. Any director individually, or any firm of which any director may be a member, may be party to, or may be pecuniarily or otherwise interested in, any contract or transaction of this corporation, provided that the fact that he or such firm is so interested shall be disclosed or shall have been known to the Board of Directors or a majority thereof, and any director of this corporation who is also a director or an officer of such other corporation, or who is so interested, may be

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counted in determining the existence of a quorum at any meeting of the Board of Directors of this corporation which shall authorize any such contract or transaction, with like force and effect as if he were not such a director or officer of such other corporation, or not so interested.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these

Articles of Incorporation this 12 day of November, 1998.

Winnifred Wilson
Winnifred Wilson, Incorporator

Stanley E. Johnson, Jr.
Stanley E. Johnson, Jr., Registered Agent

STATE OF FLORIDA)
)
COUNTY OF DADE)

BEFORE ME, the undersigned authority personally appeared Winnifred Wilson to me known to be the person who executed the foregoing Articles of Incorporation, and who has produced _____ as identification or ☒ is personally known by me and he acknowledged to me that she executed such instrument.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 12 day of November, 1998.

Stanley E. Johnson, Jr.
Notary Public
State of Florida

My Commission Expires:



STANLEY E. JOHNSON JR
My Commission CC487454
Expires May. 27, 1999
Bonded by HAI
800-422-1666

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Articles of Incorporation
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STATE OF FLORIDA)
)
COUNTY OF DADE)

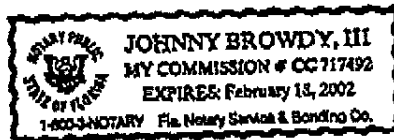
BEFORE ME, the undersigned authority personally appeared Stanley E. Johnson, Jr., to me known to be the person who executed the foregoing Articles of Incorporation, and who has produced _____ as identification or ☒ is personally known by me and he acknowledged to me that he executed such instrument.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 12 day of November, 1998.



NOTARY PUBLIC STATE OF FLORIDA

My Commission Expires:

STATE OF FLORIDA)
)
COUNTY OF DADE)



The undersigned being the duly elected and acting Director/President for MAGICAL MOMENTS AROMAS, INC. does on behalf of MAGICAL MOMENTS AROMAS, INC. certify that she is familiar with and accepts the duties and responsibilities of Director/President for MAGICAL MOMENTS AROMAS, INC.

By: 
NAME: Winnifred Wilson
TITLE: Director/President

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STATE OF FLORIDA)
)
COUNTY OF DADE)

The foregoing instrument was acknowledged before me this 12 day of _____
November, 1998 by Winnifred Wilson who has produced _____
_____ as identification for MAGICAL MOMENTS
AROMAS, INC. or ☒ is personally known by me.

Stanley E. Johnson Jr.
Name:
Notary Public

My Commission expires:



STANLEY E JOHNSON JR
My Commission CC487454
Expires May 27, 1999
Bonded by HAI
800-422-1555

STATE OF FLORIDA)
)
COUNTY OF DADE)

The undersigned being the duly elected and acting Register Agent for MAGICAL
MOMENTS AROMAS, INC. does on behalf of MAGICAL MOMENTS AROMAS, INC.
certify that he is familiar with and accepts the duties and responsibilities as Register
Agent for MAGICAL MOMENTS AROMAS, INC.

By: Stanley E. Johnson Jr.
Name: Stanley E. Johnson, Jr.
Title: Register Agent.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

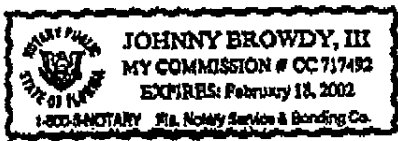
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STATE OF FLORIDA)
)
COUNTY OF DADE)

The foregoing instrument was acknowledged before me this 12 day
of NOVEMBER, 1998 by Stanley E. Johnson, Jr., who has produced
_____ as identification for MAGICAL MOMENTS AROMAS, INC. or .
✓ is personally known by me.



[Signature]
Name: _____
Notary Public.

My Commission Expires:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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