Department of State Division of Corporations

| P. O. Box 6327          | _                                |   |   | 2 5  |
|-------------------------|----------------------------------|---|---|------|
| Tallahassee, FL 32314   |                                  |   | A SEE.  | 圣    |
| SUBJECT:                | 2 Leopatra<br>Proposed corp      | Sec Ru<br>orate name - must include sur | Elix)   | 8:03 |
| Be                      | auty. Inc.                       |   | 7<br>915251<br>9801058009<br>1.75 *****78.75        |      |
| Enclosed is an original | and one(1) copy of the articl    | es of incorporation and a               | check for :   | ı    |
| \$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   |      |

407- 233 ~ 5 3 8 1 Daytime Telephone number W98-25375

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



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 10, 1998

THERESA M. FARAH 1202 S. RAMON AVE INDIALANTIC, FL 32903

SUBJECT: CLEOPATRA SECRET Ref. Number: W98000025375

We have received your document for CLEOPATRA SECRET and check(s) totaling \$78.75. However, your check(s) and document are being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6924.

Letter Number: 598A00054473

Sharon Davis Document Specialist Supervisor

## ARTICLES OF INCORPORATION

obligations of my position as registered agent.

Signature/Registered Agent

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: (LeopATRa Secret Beaut)   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| ARTICLE II PRINCIPAL OFFICE   |  |  |  |  |
| The principal place of business and mailing address of this corporation shall be:                       |  |  |  |  |
| 29-5th pro 1 1 21 22 20 2   |  |  |  |  |
| Tarl A/Ar/10 ( L. 3d 103  |  |  |  |  |
| 239-5th Am. TrdiALANTIC F.L. 32903  |  |  |  |  |
| ADMINITE CHARGE   |  |  |  |  |
| The number of shares of stock that this corporation is authorized to have outstanding at any one time ? |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| THERESA. M. FARAH-  1202. S. RAMONA AND. Indianatic,  |  |  |  |  |
| The name and Florida street address of the initial registered agent are:                                |  |  |  |  |
| THERESA.M. FARAH  |  |  |  |  |
| LOW COMMONA AND   |  |  |  |  |
| 1202. 3.10  |  |  |  |  |
| ARTICLE V INCORPORATOR F.L. 32903   |  |  |  |  |
| The name and address of the incorporator to these Articles of Incorporation are:                        |  |  |  |  |
| The <u>name and address</u> of the morporator to these Articles of morporation are.                     |  |  |  |  |
| THERESA.M. FARAH 12 lastic FL 32903   |  |  |  |  |
| THERESAID, LAKAH. Thislantic, FL 32903  |  |  |  |  |
| 1202. S. RAMONA AND Indialantic, FL 32903   |  |  |  |  |
|   |  |  |  |  |
| 0 0 0 0 0   |  |  |  |  |
| 11 2 198 Oct 29/98  |  |  |  |  |
| Signature/Incorporator Date   |  |  |  |  |
| $C_{\sigma}(t)$   |  |  |  |  |
| San Owner   |  |  |  |  |
|   |  |  |  |  |
| (An additional article must be added if an effective date is requested.)                                |  |  |  |  |
| (And additional article must be added it all effective date is reduction)                               |  |  |  |  |

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