(Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status **NEW FILINGS** AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Name Reservation Limited Partnership Reinstatement Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

99 FEB 24 AM 11: 26
DIVISION OF CORPORATION

February 22, 1999

LAZARUS

MIAMI, FL

SUBJECT: MAGDALENA'S INC. Ref. Number: W99000004371

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We have received your document for MAGDALENA'S INC.. However, the document has not been filed and is 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.

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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 599A00007974



February 24, 1999

LAZARUS

MIAMI, FL

SUBJECT: MAG'S INC.

Ref. Number: W99000004371

We have received your document for MAG'S INC.. However, the document has not been filed and is 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.

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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 799A00008546

ARTICLES OF INCORPORATION

99 FEB 26 PM 3: 36
SECRETARY OF STATE
TALLAHASSEE FLORIDA

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MAGS FACIALS INC.

ARTICLE II PRINCIPAL OFFICE

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

10031 Pines Blvd #211 Pembroke Pines Fl. 33026

ARTICLE III CAPITAL STOCK

The corporation shall have the authority to issue 1000 shares of common stock, par value \$ 1.00 per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Magdalena Leveque Ramirez 304 SW 85th Terrace # 305 Pembroke Pines Fl. 33025

ARTICLE V INCORPORATOR(S)

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

Magdalena Leveque Ramirez 304 SW 85th Terrace # 305 Pembroke Pines Fl. 33025

ARTICLE VI
DIRECTOR(S)

The name(s) and street address (es) of the director (s) to these Articles of Incorporation is (are):

Magdalena Leveque Ramirez 304 SW 85th Terrace # 305 Pembroke Pines Fl. 33025

The undersigned Incorporator(s) has (have) executed these Articles of Incorporation

this 17th day of February, 1999

Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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 is:

MAGS FACIALS INC.

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

Magdalena Leveque Ramirez 304 SW 85th Terrace # 305 Pembroke Pines Fl. 33025

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, Ι HEREBY ACCEPT 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

Signature:

February 17, 1999

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