Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone (305) 541-3694

Fax Number : (305)541-3770

FLORIDA PROFIT CORPORATION OR P.A.

MIRAGE NAILS, INC.

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Certificate of Status	0
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Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

of.

MIRAGE NAILS, INC.

(Name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME/ADURESS

The name of the corporation and address of the corporation is: (Principal)

Mirage Nails, Inc. 15319 S Dixie Highway, Miami, FI 33157

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida Law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Fifty Shares (50

of Ten Dollar(s) (\$10.00) par_value Common Stock, which sall be designated "Common Shares"

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agent of this corporation is

Name: Barbara J Dexter

Address: 15319 S Dixie Highway

City: Miami State: Fl Zip 33157

Prepared by:

Douglas W Oesterle C. → A -

9506 S Red Road

Miami, FI 33156

305)665-7155

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MELICIE VI - INI.	TAME BORKE OF BIRDCION		· · · - · -
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Name: Barbara J D	exter	_ ·	_
Address: 9340 Jam	naica Drive		
City: Miami	State: Florida	Zip: 33189	
Name:			.
Address:		<u> </u>	1
	State:	zip:	· · ·
Name:	••	• <u>1</u>	
Address:	·	• <u>-</u>	
	State:	zip:	-
ARTICLE VII - INC	iresses of the person(s) signing these A	rtiches
Name: Barbara J	Dexter		
Address: 9340 Jam	aica Drive		
City: Miami	state: Florida	zip: 33189	.
Name:			· · · · · · · · · · · · · · · · · · ·
Address:		-	•
City:	Sate:	Zip:	
in witness where of these Articles of	F, the undersigned sul Incorporation this	bscriber(s) have enderthands	xecuted. 19 99 .
		na Doller	(Seal)
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to a hum

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CERTIFICATE TO ACKNOWLEDGE REGISTERED AGENT
Certificate of Registered Agent

o£:

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MIRAGE NAILS, INC.

Pursuant to Florida Statutes. Section 48.091 and 607.034, the following is submitted: The above Corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at: 15319 S Dixie Highway

Miami, FI 33157

has named: Barbara J Dexter

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated Corporation at this place desinated in this certificate I hereby accept to act in this capacity, and agree to comply with the provisisons of Florida Law in keeping open said office.

Registered Agent

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