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

Tallahassee, FL 323	14			
SUBJECT:	SUMSHIME LASE! (Proposed corpor	HUS INCOLU rate name - must include kut	ffix)	.ca
		4!	000028659 -05/07/9901/ *****87.50	006003 *****87.
Enclosed is an origina	al and one(1) copy of the article	s of incorporation and a	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Kellie Marie(ЙМИЛО fint#d of typed)		-
	SDS Pennsylva	ania Way		e ·
		34243 State & Zip	SECRETARY TALLAHASSE	
n la	03-)30- Daytime To	2555 elephone number	OF ST	- Indian continue

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

ARTICLES OF INCORPORATION

FILED The undersigned incorporator, for the purpose of forming a corporation under the Florida 99 MAY -6 PM 3: 48 Business Corporation Act, hereby adopts the following Articles of Incorporation. Sunshine Laser Centers Inaliahassee. FLORIDA *ARTICLE I NAME* The name of the corporation shall be: PRINCIPAL OFFICE *ARTICLE II* 808 Punsylvania Way Saasota, FL. 34243 The principal place of business and mailing address of this corporation shall be: ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Mr. Million], 000;000 INITIAL REGISTERED AGENT AND STREET ADDRESS Kellie Marie Campayno 808 Pennsylvania Way Sorasota, FL. 34243 The name and Florida street address of the initial registered agent are: ARTICLE V **INCORPORATOR** The name and address of the incorporator to these Articles of Incorporation are:

(An additional article must be added if an effective date is requested.)

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

Signaturé/Incorporator