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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 : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 : (305)599-0839

Phone Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

LUCY VALENTINE'S BEAUTY, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION OF

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

ARTICLE I NAME

The name of the corporation shall be:

LUCY VALENTINE'S BEAUTY, INC.

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

1995 SW 1 ST. Miami, Fl 33125

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 SHARES \$ 1.00 PER VALUE

ARTICLE IV TERMS OF EXISTENCE

This corporation is to exist perpetually.

Prepared by:

Hispan American Services Inc. 1885 W. Flagler St. Suite #11 Miami, FL 33135 99 JUL -9 PH 2: 31
SECRETARY OF STATE,
TALLAHASSEE, FINANCE

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address (es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected:

Lucy Arellana 1290 E. 6th Ave. Hialeah, FL 33010

ARTICLE VI INCORPORATOR(S)

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

Lucy Arellana 1290 E. 6th Ave. Hialeah, FL 33010

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 7th day of July, 1999

Signature(s) of Incorporator(s)

July Apellana

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

1. The name of the corporation
2. The name and address of the registered agent and office is: LUCY ARELLANA
(P.O. BOX NOT ACCEPTABLE) 1290 E 6 th Ave., Hialeah, FL 33010
(ADDRESS OFFICE)
SIGNATURE Lucy Arellana (Corporate officer)
TITLE President
DATEJuly, 07, 1999
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THIS ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALI STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.
SIGNATURE Lucy Audlance

DATE

July, 07, 1999