

CCRS  
103 N. MERIDIAN STREET, LOWER LEVEL  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

P990000087514

CONTACT: CINDY HICKS

DATE:

10-5-99

700003005437--6

-10/05/99--01037--015

\*\*\*\*\*78.75 \*\*\*\*\*78.75

REF. #:

0169.8501

CORP. NAME:

Home Spa Services, Inc

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT                        | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME         |
| <input type="checkbox"/> CERT. OF AUTHORITY                   | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT                        | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION          | <input type="checkbox"/> UCC-1                  | <input type="checkbox"/> UCC-3                   |
| <input type="checkbox"/> OTHER: _____                         |   |  |

STATE FEES PREPAID WITH CHECK# 6010 FOR \$ 72.75

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF STATUS | <input type="checkbox"/> PLAIN STAMPED COPY |
|--|--|---|

Examiner's Initials

gjk  
10/5

**ARTICLES OF INCORPORATION**  
**OF**  
**HOME SPA SERVICES, INC.**

FILED  
99 OCT -5 AM 11:47  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt the following Articles of Incorporation:

**ARTICLE ONE**

**NAME**

The name and principal address of the Corporation is:

**HOME SPA SERVICES, INC.**

whose address is Apt. 516, 600 Parkview Drive, Hallandale, FL 33009.

**ARTICLE TWO**

**DURATION**

The term of existence of the Corporation is perpetual.

**ARTICLE THREE**

**PURPOSE**

The Corporation may transact any and all lawful business for which corporations may incorporate under the Florida General Corporation Act.

**ARTICLE FOUR**

**CAPITAL STOCK**

The aggregate number of shares which the Corporation has authority to issue is 5,000 shares, all of which shall be common shares with a par value of One Dollars (\$1.00).

**ARTICLE FIVE**

**PRE-EMPTIVE RIGHTS GRANTED**

Each shareholder of any class of stock of this Corporation shall be entitled to full pre-emptive rights to purchase any unissued or treasury shares of the Corporation, and any securities of the Corporation convertible into or carrying a right to subscribe to or acquire shares of any such unissued or treasury shares.

**ARTICLE SIX**

**REGISTERED OFFICE**

The street address of the initial registered office of the Corporation is: 125 North 46 Avenue, Hollywood, FL 33021, and the name of the initial Registered Agent is at such address is Bruce M. Gottlieb.

**ARTICLE SEVEN**

**DIRECTORS**

The Board of Directors of the Corporation shall consist of one (1). The number of Directors is to be set by the Shareholders at a meeting called for that purpose.

The names and addresses of the first Board of Directors are:

NAME

ADDRESS

IRMA AGID

Apt. 516, 600 Parkview Drive  
Hallandale, FL 33009

ARTICLE EIGHT

INCORPORATORS

The name and address of the Incorporator is:

NAME

ADDRESS


BRUCE M. GOTTLIEB

125 North 46 Avenue  
Hollywood, FL 33021

FILED  
99 OCT -5 AM 11:47  
TALLAHASSEE, FLORIDA  
STATE

IN WITNESS WHEREOF, I have subscribed my name, on this 29<sup>th</sup> day of  
September, 1999.

I AM HEREBY FAMILIAR WITH AND ACCEPT THE DUTIES  
AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID  
CORPORATION.

  
\_\_\_\_\_  
BRUCE M. GOTTLIEB  
Incorporator and Registered Agent

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing Articles of Incorporation was acknowledged before me this 29<sup>th</sup> day of  
September, 1999, by BRUCE M. GOTTLIEB, who is personally known to me, or who has  
produced N/A as identification and who did take an oath.

NOTARY PUBLIC:

By: Angela Williams  
Print: ANGELA WILLIAMS  
My Commission Expires: \_\_\_\_\_

