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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

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MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

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OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. SD BE IT & SALON, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

RECEIVED
99 NOV -2 AM 11:43
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
99 NOV -2 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials

Date NOVEMBER 1, 1999

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Re SO BE IT! SALON, INC., Inc.
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

(individual's name)

SO BE IT! SALON, INC.

(name of corporation)

MAILING ADDRESS OF CORPORATION		
1209 - 17TH STREET		
MIAMI BEACH, FLORIDA 33139		
PHONE		
(305)	535-0035	
Area Code	Phone Number	Ext.

ARTICLES OF INCORPORATION

of
SO BE IT! SALON, 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

The name of the corporation is:

SO BE IT! SALON, INC.

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 FIVE HUNDRED shares (500) of ONE Dollar(s) (\$ 1.00) par. value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	BESSIE SPIROU
ADDRESS	1209- 17TH STREET
CITY	MIAMI BEACH
STATE	FLORIDA
ZIP	33139

The principal office, if known, or the mailing address of the corporation is:

NAME	SO BE IT! SALON, INC.
ADDRESS	1209- 17TH STREET
CITY	MIAMI BEACH
STATE	FLORIDA
ZIP	33139

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	MARIO LUIS SQUITIERI	PRESIDENT	60% SHARES
ADDRESS	1209- 17TH STREET		
CITY	MIAMI BEACH	STATE	FLORIDA
ZIP	33139		
NAME	BESSIE SPIROU	VICE PRES/SEC./TREAS	40% SHARES
ADDRESS	1209- 17TH STREET		
CITY	MIAMI BEACH	STATE	FLORIDA
ZIP	33139		
NAME			
ADDRESS			
CITY		STATE	FLORIDA
ZIP			

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FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Article VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	MARIO LUIS SQUITIERI			
ADDRESS	1209- 17TH STREET			
CITY	MIAMI BEACH	STATE	FLORIDA	ZIP 33139
NAME	BESSIE SPIROU			
ADDRESS	1209- 17TH STREET			
CITY	MIAMI BEACH	STATE	FLORIDA	ZIP 33139
NAME				
ADDRESS				
CITY		STATE		ZIP

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 1
day of NOVEMBER, 19 99

Mario Squitieri (Seal)
[Signature] (Seal)
[Signature] (Seal)

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above,
personally appeared:

Mario Squitieri
Signature
[Signature]
Signature
[Signature]
Signature

FL DL#S360-552-63-056-0

Form of Identification

FL DL#S160-060-72-585-0

Form of Identification

Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before
me that THEY executed these articles of Incorporation, that I relied upon the form of identification
of the above named person as indicated opposite each name, and that an oath was not taken.

NOTATRY RUBBER STAMP SEAL

Witness my hand and official seal in the County and State last aforesaid this

1 day of NOVEMBER, 19 99

Notary Signature

Printed Notary Signature

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

SO BE IT! SALON, INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, 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 1209- 17TH STREET

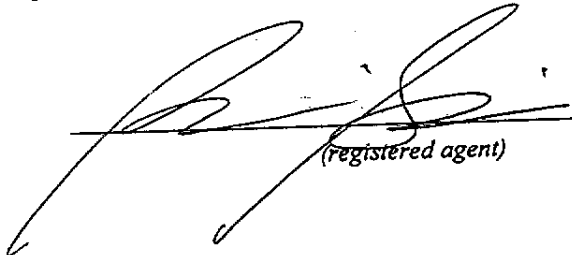
MIAMI BEACH, FLORIDA 33139

has named BESSIE SPIROU

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

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.


(registered agent)