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99 NOV -8 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Xsalonce, Inc. c/o A A Ali, CPA 1322 North Pine Hills Road Orlando, Florida 32808

November 3, 1999

Secretary of State Division of Corporation 409 East Gaines Street Tallahassee, Fl 32399 700003037947--5 -11/08/99--01096--007 \*\*\*\*\*78.75 \*\*\*\*\*78.75

Re: Xsalonce, Inc.

Gentlemen:

Enclosed please find Articles of Incorporation Xsalonce, Inc. in the amount of \$78.75.

This represents the cost of the filing fees, Certificate of Status and fee for Registered Agent Designation for the above named corporation.

Very truly yours,

dristene

AA/cl

Enclosures

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#### ARTICLES OF INCORPORATION

of

#### Xsalonce, Inc.

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:

Xsalonce, Inc.

1294 Crow Way, Suite 104, Casselberry, FL 32707

#### 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 1000 shares of (One) Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

#### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agents of this Corporation is:

Name Kim Coffin

Address 1294 Crow Way, Suite 104

City Casselberry, Florida 32707

Form 215: Articles of Incorporation

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#### ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). The name and address of the initial director(s) of the corporation are as follows:

Name	Kim Coffin		
Address	1294 Crow Way,	Suite 104	
City	Casselberry,	Florida	32707

#### ARTICLE VII - INCORPORATORS

The name and address of the person(s) signing these articles of Incorporation are as follows:

Name	Kim Coffin		·	· · · · · · · · · · · · · · · · · · ·
Address	1294 Crow Way,	Suite 104	- · · · · · · · · · · · · · · · · · · ·	
City	Casselberry,	Florida _	32707	<u> </u>

IN WITNESS WHEREOF, the under	rsigned subsc	riber(s) Have	executed	
these Articles of Incorporati	ion this $\frac{3r}{3}$	day of Novem	<u>694</u> , 1999.	
		1 km	(Seal)	
			(Seal)	<del>-   -</del>
	·		(Seal)	
STATE OF FLORIDA				
COUNTY OF ORANGE		<del>-</del>		
before me, a Notary Public au the State and County set fort	uthorized to the theorem is the state of the	take acknowleds	gements in ed	. =
FC DL. C150	- 505-66-3	723-1		
known to me and known to be t				र⊈की. mar
foregoing Articles of Incorpo me that they executed these A	oration, and waticles of In	who acknowledge acorporation.	ed before	
IN WITNESS WHEREOF, I have he	ereunto affixe	ed my hand and	seal, in	
the State and County aforesai	ld, this 3rd	day of Kovembs	¥_, 1999.	
(Notary Seal)	_ DOLL	-162		
	_	.c/State of F.	lorida	- 1271L
NOTARY PUBLIC - STATE OF FLORIDA N. WILLIAMS-BRYAN COMMISSION # CC750138	at Large)			
EXPIRES 6/10/2002  BONDED THRU ASA 1-888-NOTARY1	My commission	on expires: OC-	10-2002	

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#### CERTIFICATE AND ACKNOWLEDGEMENT

#### OF REGISTERED AGENT

## CERTIFICATE OF REGISTERED AGENT OF Xsalonce, Inc.

Pursuant to Florida Statutes Sections 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 _	1294 Crow Way,	Suite 104	<u> </u>			<u> </u>	
	Casselberry,	Florida 32707					· -= -
has i	named <u>Kim Cof</u>	fin	<u></u>		··	<u>y.l.</u> .,	. <u>.</u>
locat	ted at the afore	esaid address, a	s its Re	gistered	Agent to	5	

accept service of process within this state.

#### ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, 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

Form 215: Certificate & Acknowledgement Registered Agent

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