P9900010396

Proposed corporate name - must include suffix)

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

400003054214--2 -11/24/99--01060--013 ******70.00 ******70.00

Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for :		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM:	Juan Estelles Name (Printed or typed) 13800 S. w. 8 th st., PMB # 834 Address				
	Mi Ami, For City, S (305) 632 Daytime Tel	2- 33184 State & Zip 	SECRETARY OF STATE TALLAHASSEE, FLORIDA	99 NOV 24 AM II: 27	

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



ARTICLES OF INCORPORATION

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

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99 NOV 21	CO
99 NOV 24 TALLAHJANY	AH 11:27
TALLAHASSEE	FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Fragrances on Wheels, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8422 N.W. 66 ST.

MIAMI, Frosida 33166.

ARTICLE III SHARES

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

100.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Juan Estelles 8422 N.W. 66 ST.

MiAmi, Prida 33/66

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

JUAN Estelles

13800. S.W. 8th ST., PMB # 334

milmi, Florida 33184

ignature/Incorporator

(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