## F22000004919

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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S. ROBERTS AUG - 4 2022



115 N CALHOUN ST., STE, 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: 120000000088

Date: August 04, 2022		Account#: 1200000000088				
Name: David S	Shulman	-				
Reference #:	1758882					
Entity Name:		SKINVEST, INC.				
Articles of Incorp	oration/Authori	ization to Transact Busin	ness			
Amendment						
Change of Agent			ICCHEC2 CALI			
Reinstatement			ISSUES? CALL  David:			
☐ Conversion			850-270-0082			
Merger Merger						
☐ Dissolution/Witho	drawal					
Fictitious Name						
Other						
Authorized Amount:	<b>\$70</b> .	00				
Signature:	David Shalma	л 				

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

l. <u> </u>	S	kinvest, Ind	C		
,	orporation; must include "INCORPO orp," "Inc," "Co," or "Corp.")	RATED," "C	OMPANY," "CORPORATION,"		
(If name unavaila	ble in Florida, enter alternate corpora	ate name adop	ted for the purpose of transacting	business in Florida)	
Delaware		3.	86-1286358		
(State or country under the law of which it is incorporated)			(FEI number. if applicable)		
11/18/2020		5.	Perpetual (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
(Date of incorporation)			(Date of duration, if other th	an perpetual)	
)					
			rida, if prior to registration) F.S., to determine penalty liability	)	
	104 Ukiah Lan	•			
		(Principal of	fice address)		
	115 North Calhoun Stre	<u> </u>			
. Name and <u>street</u>	(Curr <u>t address</u> of Florida registered ag	v	dress, if different)  ox NOT acceptable)	2822 AUG - 1	
Name:	COGENCY GLOBAL	. INC.	-	. <del>-</del>	
Office Address:	115 North Calhoun Stree	et, Suite 4	-	· 9:	
	Tallahassee		, Florida <u>32301</u>		
	(City)		(Zip code)	. 🗸	

## 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: **B. OFFICERS** Elianna Goldstein President: 104 Ukiah Lane, Chapel Hill, NC 27514 Vice President: Address: Secretary: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Fliance Goldstein
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.

<u>Delaware</u>

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SKINVEST, INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FOURTH DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SKINVEST, INC."

WAS INCORPORATED ON THE EIGHTEENTH DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Jeffrey W Bullecs, Secretary of State

Authentication: 204088167