

9/1/22, 11:40 AM

Division of Corporations

P 22000068144

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : EXPRESS CORPORATE FILING SERVICE INC.
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Phone : (305)444-4994
Fax Number : (305)328-4774

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION
VANILLA AESTHETIC CENTER, INC

Table with 2 columns: Item and Value. Rows include Certificate of Status (0), Certified Copy (1), Page Count (03), and Estimated Charge (\$78.75).

22 SEP - 1 PM 11:58
SECRETARY OF STATE
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2022 SEP - 1 PM 12:19

REGISTRATION
OFFICIAL
CHECKS

ARTICLES OF INCORPORATION  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME  
The name of the corporation shall be: VANILLA AESTHETIC CENTER, INC

ARTICLE II PRINCIPAL OFFICE  
Principal street address: 2735 CORAL WAY  
Mailing address, if different is: 7915 NW 64 STREET  
MIAMI, FL 33145 MIAMI, FL 33166

ARTICLE III PURPOSE  
The purpose for which the corporation is organized is: TO TRANSACT ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES 200 SHARES PAR VALUE @ \$1.00  
The number of shares of stock is: \_\_\_\_\_

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARGARITA LINARES. PD Name and Title: \_\_\_\_\_  
Address: 7915 NW 64 STREET Address: \_\_\_\_\_  
MIAMI, FL 33166 \_\_\_\_\_  
Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL 32399

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARGARITA LINARES  
 Address: 7915 NW 64 STREET  
MIAMI, FL 33166

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MARGARITA LINARES  
 Address: 7915 NW 64 STREET  
MIAMI, FL 33166

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

*Margarita Linares*  
 Required Signature/Registered Agent

08/31/2022  
 Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.135, F.S.*

*Margarita Linares*  
 Required Signature/Incorporator

08/31/2022  
 Date

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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