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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Sage's Touch Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Shirlow Smith-Campbell
Name (Printed or typed)

12356 Kiwi Court
Address

Jacksonville FL 32225
City, State & Zip

904-386-2437
Daytime Telephone number

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

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: Sage's Touch Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 12356 Kiwi Court
Jacksonville, FL 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Massage Therapy

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Shirlow Smith - Campbell

ARTICLE VI REGISTERED AGENT

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

Shirlow Smith - Campbell
12356 Kiwi Court
Jacksonville, FL 32225

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Shirlow Smith - Campbell
12356 Kiwi Court
Jacksonville, FL 32225

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

Shirlow Smith - Campbell 11/28/05
Signature/Registered Agent - Shirlow Smith - Campbell Date
Shirlow Smith - Campbell 11/28/05
Signature/Incorporator - Shirlow Smith - Campbell Date

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