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CORPORATION(S) NAME

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Aqua MassageXpress, Inc.		02 14
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(X) Profit	() Amendment	() Merger () Mark () Other () Change of RA
() Nonprofit (X) Foreign	() Dissolution/Withdrawal	() Mark
(A) Foleigh	() Reinstatement	() Mark
() Limited Partnership	() Annual Report	() Other
() LLC	() Name Registration	() Other S T
()===	() Fictitious Name	/()ucc
(X) Certified Copy	() Photocopies	/() CUS = -
() Call When Ready	() Call If Problem /	() After 4:30
(x) Walk In	() Will Wait	(x) Pick Up
() Mail Out		*
_	- 10.00	- 1 1 - 1 - 1 - 1
Name	2/8/02	Order#: 5109135
Availability		400004896534 -02/08/0201037009
Document		-U2/08/0201037009
Examiner		Ref#: <u>*****7</u> 8.75 *****78.
Updater Verifier		
Venner WP Verifier		Amount: \$
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO FE

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

1.	Aqua MassageXpress, Inc.		ED", "COMPANY", "CORPORATION" or
	(Name of corporation; must include the word "INCORPORA words or abbreviations of like import in language as will cle natural person or partnership if not so contained in the name	arly	y indicate that it is a corporation instead of a
2.	Massachusetts	3.	Applied for 69-0008982
	(State or country under the law of which it is incorporated)	-	(FEI number, if applicable)
4.	01/01/2002	5.	Perpetual
	(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
5.	Upon Qualification		
	(Date first transacted business in Florida. If corporation has (SEE SECTIONS 607.15	not 501	transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)
7.	PO Box 67174, Chestnut Hill, MA 02467		
	(Principal office a	dd:	ress)
	same		
	(Current mailing a	dd	ress)
3.	To engage in the business of providing water massage service activities permitted a corporation.		
	(Purpose(s) of corporation authorized in home state or	co	untry to be carried out in state of Florida)
).	Name and street address of Florida registered agen	t:	(P.O. Box or Mail Drop Box NOT acceptable)
	Name: CT Corporation System		·
Οf	fice Address: 1200 South Pine Island Road		<u></u>
	Plantation		, Florida 33324
	(City)		(Zip code)
_	man and the second seco		

10. 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.

By: CTCorporation System KRISTEN BETZGER
ASSISTANT SECRETARY
(Registered agents at nature)

11. 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.

12. Names and business addresses of officers and/or directors:
A. DIRECTORS SEE ATTACHMENT
Chairman:
Address:
The second secon
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS SEE ATTACHMENT
President: Jay M. Bernten
Address: PO Box 67174
Chestnut Hill, MA 02467
Vice President:
Address:
Secretary:
Address:
Treasurer: Jay M. Bernten
Address: PO Box 67174 Chestnut Hill, MA 02467
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
Ja Ja W Bernten President

(Typed or printed name and capacity of person signing application)

FL019 - C T Filing Manager Online

Attachment to Florida
Application By Foreign Corporation for Authorization to Transact Business In Florida

Officers & Directors

1. Full Name:

Officer/Director: Officer's Title:

Business Address:

City: State:

ZIP Code:

2. Full Name:

Officer/Director: Officer's Title:

Business Address:

City: State: ZIP Code: Jay M. Bernten Officer, Director

President, Treasurer, Clerk

PO Box 67174 Chestnut Hill

MA 02467

Michael Paris

Officer

Assistant Clerk

% BRFG, 1 Financial Ctr.

Boston MA 02111





The Commonwealth of Massachusetts Secretary of the Commonwealth

State Kouse, Boston, Massachusetts Ox

February 1, 2002

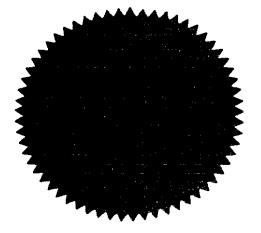
TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

AQUA MASSAGEXPRESS, INC.

is a domestic corporation organized on January 1, 2002, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156B section 101 for said corporations dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which, I have hereunto affixed the Great Seal of the Commonwealth on the date first above written.

William Travino Galecin

Secretary of the Commonwealth

*MGL Chapter 156B Section 83A provides that certain consolidations and mergers may be filed with the division within thirty days after the effective date of the merger or consolidation.