

LO20000006049

The Legal Center

ATTORNEYS AT LAW

March 6, 2002

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

900005081289--1
-03/11/02--01067--013
****133.75 ****133.75

Re: HANDS DOWN MASSAGE THERAPY, LLC

Greetings:

Enclosed please find the original and one copy of the Articles of Organization for the above named limited liability company along with a check to cover the following expenses:

Filing Fee	\$100.00
Certificate of Status	8.75
Registered Agent Fee	<u>25.00</u>
TOTAL	\$133.75

FILED
MAR 11 PM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Please return the enclosed copy of the articles with your stamp on it showing the filing date.

Cordially yours,

THE LEGAL CENTER

Kent W. Davis/ps

Kent W. Davis
Attorney

KWD/ps

encls.

LO2-6049
A

ARTICLES OF ORGANIZATION
FOR

HANDS DOWN MASSAGE THERAPY, LLC

(A Limited Liability Company)

These Articles of Organization are signed and delivered by the undersigned for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE I. NAME

The name of this limited liability company is:

HANDS DOWN MASSAGE THERAPY, LLC

ARTICLE II. PRINCIPAL OFFICE

The mailing address and the street address of the principal office of the limited liability company is:

3375 34th St. N., Ste. D
St. Petersburg, FL 33713

ARTICLE III. REGISTERED OFFICE AND AGENT

The name and street address of the initial Registered Agent and office of this limited liability company is:

Angus J. Towse
3375 34th St. N., Ste. D
St. Petersburg, FL 33713

ARTICLE IV. MANAGEMENT

This limited liability company shall be managed by one or more members and is, therefore, a member-managed company.

IN WITNESS WHEREOF, I have hereunto set my hand and Seal this 6th day of March, 2002.

ANGUS J. TOWSE

Member

RACHEL L. BERNSTEIN

Member

STATE OF FLORIDA
COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 6th day of March, 2002, by Angus J. Towse and Rachel L. Bernstein, who have produced drivers' licenses as identification.

Dolores S. Maralik
Notary Public



DOLORES S. MARALIK
Notary Public, State of Florida
My Comm. Expires Nov. 28, 2003
No. CC875272

FILED
02 MAR 11 PM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent for HANDS DOWN MASSAGE THERAPY, LLC at the place designated in this certificate, namely 3375 34th St. N., Ste. D, St. Petersburg, FL 33713,

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 as provided for in Chapter 608, F.S.

Dated this 6th day of March, 2002.


Registered Agent
ANGUS J. TOWSE

02 MAR 11 PM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED