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

5**00003818735--2** -03/08/01--01060--013 *****78.75 *****78.75

SUBJECT: He		Hands, I	NAME – MUST INCLUI	DE SUFFIX)	TALLAHAS	OI MAR -8	프
Enclosed is an original and one (1) copy of the articles of incorporation and a check for:					ALCOL SIN	MHF47	명
□ \$70.00 Filing Fee	_	Fee & icate of	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate PY REQUIRED	TATE ORIDA		

FROM: Stacy Jimenez
Name (Printed or typed)

3831 NW 4th Ave
Address

Pompand beach, PL 33064

City, State & Zip

(561) 989 - 9330 ext 250

Daytime Telephone number

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

Articles of Incorporation

Healing Hands, Inc.

Articles of Incorporation

Incompliance with chapter 617, F.S., (not for profit)

Article I Name

The name of the corporation shall be:

Healing Hands, Inc.

Article II Principle Office

The principle place of business and mailing address of this corporation shall be:

Healing Hands Inc. 3831 NW 4th Ave Pompano Beach, Fl 33064

Article III Purpose

The purpose for which the corporation is organized is:

To provide charitable therapeutic massage to the community which is fifty five years and older, that which are confined to nursing homes, assisted living or retirement communities that suffer a debilitating disease of the muscles, bones and/or joints.

Article IV Manner of Election

The matter in which the directors are elected or appointed:

Methods of election as set forth in the by-laws of this corporation

Article V Initial Directors/Officers

Article VI Initial Registered Agent and Street Address

Stacy Jimenez 3831 NW 4th Ave Pompano Beach, FL 33064

Article VII Incorporators Name and Street Address

Stacy Jimenez 3831 NW 4th Ave Pompano Beach, FL 33064

The undersigned has executed these Articles of Incorporation this 6th of March 2001

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.

Signature/Incorporator