

NO40000001570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

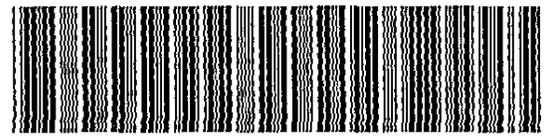
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/10/04--01038--003 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 FEB -9 AM 9:40

FILED

Handwritten signature

TRANSMITTAL LETTER

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

SUBJECT: SANCTUARY FOR HEALING, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: TODD BRAZEE c/o BARBARA WALKER
Name (Printed or typed)

401 RIVIERA ISLE DR #601
Address

FT. LAUDERDALE, FL 33301
City, State & Zip

(919) 637-2038
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

SANCTUARY FOR HEALING, INC.

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ARTICLE II PRINCIPAL OFFICE

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

**401 RIVIERA ISLE DR #601
FT. LAUDERDALE, FL 33301**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE PRIMARY PURPOSE IS TO PROVIDE PROFESSIONAL AND HOLISTIC SERVICES TO INDIVIDUALS SUFFERING FROM EMOTIONAL TRAUMA.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

~~THE~~ DIRECTORS APPOINTED BY INCORPORATOR, TO BE REVIEWED IN 24 MONTHS.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

① **SUSAN MICHELE
PRESIDENT
106 SAN JUAN DR
ISLAMORADA, FL
33036**

② **BARBARA WALKER
401 RIVIERA ISLE DR #601
FT LAUDERDALE, FL 33301
VICE PRESIDENT/REGISTERED AGENT**

③ **DAVID STRINGFIELD
TREASURER
3500 GALT OCEAN DRIVE
#506
FT. LAUDERDALE, FL
33308**

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

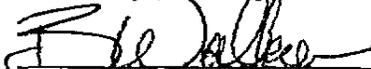
**BARBARA WALKER
401 RIVIERA ISLE DR #601
FT LAUDERDALE, FL 33301**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**TODD BRAZEE
C/O BARBARA WALKER
401 RIVIERA ISLE DR #601 FT. LAUDERDALE, FL 33301**

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/Registered Agent

2-5-04
Date


Signature/Incorporator

2-5-04
Date