

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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The Works Therapeutic Massage

Inc.

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- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
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# ARTICLES OF INCORPORATION

FILED  
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OF

## THE WORKS THERAPUTIC MASSAGE INC

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

### ARTICLE I: NAME

The name of the corporation is **THE WORKS THERAPUTIC MASSAGE INC**

### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **9398 Buckhaven Trail, Tallahassee, FL 32312.**

### ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one-hundred (100) shares having a par value of one dollar (\$1.00) per share.

#### **ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is **Paul A. Lehrman, Attorney, 7600 Bradforville Road, Tallahassee, FL 32308.**

#### **ARTICLE V: INCORPORATOR**

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### **ARTICLE VI: INITIAL BOARD OF DIRECTORS**

The name and address of the initial Board of Directors of the corporation is **Jill M. Klingerman, 9398 Buckhaven Trail, Tallahassee, FL 32312.**

#### **ARTICLE VII: SPECIAL PROVISION**

It is the intent of the incorporator and directors that the corporation qualify under Section 1244 of the Internal Revenue Code and that the corporation file as a Sub S Corporation. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

The undersigned has executed these Articles of Incorporation this 2nd day of October 2000.

"Capital Connection, Inc. by Lance L. McGee, Client Representative"

Lance L. McGee

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## CERTIFICATE OF DESIGNATION

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## REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: THE WORKS THERAPEUTIC  
MASSAGE, INC.

2. The name and street address of the registered agent and office is: PAUL A. LEHRMAN, ATTORNEY  
7600 BRADFORDVILLE RD.  
TALLAHASSEE FLORIDA

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

