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TRANSMITTAL LETTER

FILED

00 OCT 19 PM 2: 22

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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-10/19/00--01066--012  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: SOFT TOUCH MASSAGE THERAPY, 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 of Status

ADDITIONAL COPY REQUIRED

FROM: GARY S. YOUNG  
Name (Printed or typed)

5047 PENELAND LANE  
Address

ALTAMONTE SPRINGS, FL 32714  
City, State & Zip

(407)921-5648  
Daytime Telephone number

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Re 10/19/00

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: *SOFT TOUCH MASSAGE THERAPY, INC*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is: *5047 PINELAND LANE  
ALTAMONTE SPRINGS, FL 32714*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *THE PURPOSE OF THIS CORPORATION SHALL BE TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH CORPORATIONS MAY BE ORGANIZED UNDER THE BUSINESS CORPORATION LAW.*

ARTICLE IV SHARES

The number of shares of stock is: *THE CORPORATION SHALL HAVE THE AUTHORITY TO ISSUE 200 SHARES OF COMMON STOCK, PAR VALUE \$.01 PER SHARE.*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: *GARY S. YOUNG  
5047 PINELAND LANE  
ALTAMONTE SPRINGS, FL 32714*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: *GARY S. YOUNG  
5047 PINELAND LANE  
ALTAMONTE SPRINGS, FL 32714*

\*\*\*\*\*  
*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

Date

*10/18/00*

Signature/Incorporator

Date

*10/18/00*