## 7010000 Z 70 86

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

300003830553--5 -03/12/01--01080--012 \*\*\*\*\*87.50 \*\*\*\*\*87.50

	_	7	obs dell'in			
Enclosed is an o	riginal and one(1) copy of the artic	cles of incorporation and a	a check for :			
☐ \$70.0 Filing Fe	00 📮 \$78.75	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	Torrest and the second		
FR	P.O. Box 1	Printed or typed)  131  Address		SECHETARY OF STA	OIMARIZ PM 2:	FILED
	Palm City	F 3499 , State & Zip	1		0	
		8908_ Telephone number				

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

' 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:	
Aqua Message Systems, Incorporated	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  \[ \rho_\cappa_\ca	
Message Therapy Provider Via Aquatic Technolog	ical Engineering
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS DIRECTORS (optional)	
The name(s) and address(es):	FILED  OI MAR IZ PM 2: 10  SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE VI REGISTERED AGENT	STATI OFMI
The <u>name and Florida street address</u> of the registered agent is:	₩ =
David WARREN  1811 S.W. Mapp Rd  Polm City, F1 34990  ABTICLE WILL INCORPORATION	
ARTICLE VII ' INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
DAUTO WARRED	
P.O. Box 1/31 Palm City, F1 34991 ***********************************	· ** ** ** ** ** ** ** ** ** ** ** ** **
Having been named as registered agent to accept service of process for the above stated corporation at the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capac	place designated in this
Signature/Registered Agent Date	07/01
=100	127/21
Signature/Incorporator Date	0/101