

TRANSMITTAL LETTER

P01000060609

FILED

01 JUN 15 PM 5:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

700004422357--9
-06/15/01--01059--007
*****87.50 *****87.50

SUBJECT: LIGHT HANDS SOFT TOUCH 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: CHRISTINE GREIG
Name (Printed or typed)

11251 KNOTTY PINE DRIVE
Address

NEWPORT RICHEY FL 324654
City, State & Zip

727 856 9616
Daytime 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:

LIGHT HANDS SOFT TOUCH

FILED
01 JUN 15 PM 5:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11251 KNOTTYPINE DRIVE
NEW PORT RICHEY
FL 34654

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MASSAGE THERAPY & COSMETOLOGY

ARTICLE IV SHARES

The number of shares of stock is:

5

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ALL AT

GORDON GREIG PRESIDENT

RIA N GREIG VICE PRESIDENT

GARETH J GREIG EXECUTIVE VICE PRESIDENT

TRISTIAN A GREIG DIRECTOR

11251 KNOTTYPINE DRIVE NEW PORT RICHEY FL 34654

ARTICLE VI REGISTERED AGENT

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

CHRISTINE A GREIG

11251 KNOTTYPINE DRIVE

NEW PORT RICHEY

FL 34654

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GORDON A GREIG

11251 KNOTTYPINE DRIVE

NEWPORT RICHEY FLORIDA 34654

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

05/4/01

Signature/Incorporator

Date

05/4/01