

**P01000066265**  
TRANSMITTAL LETTER  
**FILED**

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

01 JUL -2 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SUBJECT:** My Body Senses, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

100004456411--9  
-07/02/01--01094--007  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☒ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Benjamin Ortiz  
Name (Printed or typed)

PO Box 43-1098  
Address

South Miami, FL 33243-1098  
City, State & Zip

305-596-3729  
Daytime Telephone number

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

C. BLALOCK JUL 5 2001

# ARTICLES OF INCORPORATION

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

FILED

01 JUL -2 PM 2: 52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

My Body Senses, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PO Box 43-1098  
South Miami, FL 33243-1098

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of engaging in any activities or business permitted under the laws of the United States and of the State of Florida.

## ARTICLE IV SHARES

The number of shares of stock is:

50

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Benjamin Ortiz, President  
5900 SW 73 Street, #106  
South Miami, FL 33143

## ARTICLE VI REGISTERED AGENT

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

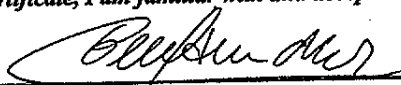
Benjamin Ortiz  
5900 SW 73 Street, #106  
South Miami, FL 33143

## ARTICLE VII INCORPORATOR

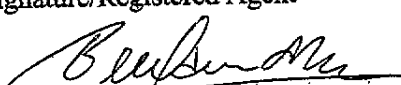
The name and address of the Incorporator is:

Benjamin Ortiz  
5900 SW 73 Street, #106  
South Miami, FL 33143

\*\*\*\*\*  
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

6/29/01  
Date

  
Signature/Incorporator

6/29/01  
Date