TRANSMITTAL LETTER OIOO///3//8

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

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SUBJECT: SKINCARE AND THERAPEUTIC MASSAGE OCALA, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
			, v		•
Enclosed is an original	al and one(1) copy of the article	es of incorporation and a	check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED	of	
FROM:	FERNANDO PARIS Name (Pri	inted or typed)	-	OI SE(-
	<u>Orlando Fl 32825-647</u>	ddress 29 State & Zip		NOV 26 AM IO: 23 CCRETARY OF STATE LAHASSEE, FLORID	FILED
	•	•		23 ATE RID/	

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

Daytime Telephone number

Ps,/25/01

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and 621 - Florida Statutes

01 NOV 26 AM 10: 23

SECRETARY OF STATE TALLAHASSEE, FLORID.

ARTICLE I NAME

The name of the Corporation shall be SKINCARE AND THERAPEUTIC MASSAGE OCALA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 101 NE 50th Ave- Ocala, Florida 34471

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to do any and all legal acts as permitted under the laws of the United States and State of Florida

ARTICLE IV SHARES

The number of shares of stock is 500 of voting common stock each having the value of \$ 1.00

ARTICLE V INITIAL OFFICERS / DIRECTORS

The names and address are:

Glenn M. Stein

President - 250 shares

101 NE 50th Ave-Ocala

F1 34471

Jorge A. Ayala

Vice-President 250 shares

101 NE 50th Ave-Ocala

F1 34471

ARTICLE VI REGISTERED AGENT

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

Glenn M. Stein - 101 NE 50th Ave- @cala fl 34471

ARTICLE VII INCORPORATOR(S)

The name and address of the Incorporators are:

Glenn M. Stein and Jorge A. Ayala - 101 NE 50th Ave- Ocala

Clonn M Stoin

DATE

Jorge A. Avala

Incorporator

Incorporator

ACCEPTANCE

Having been named as registered agent to accept service ofprocess for the above stated corporation at the place designated n this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature Registered Agent

11-17-01

Date