TRANSMITTAL LETTER

## DOIODOILLE

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

SUBJECT:	Five Elemen			
		6 <sup>1</sup>	40000471 -12/10/01 *****87.	01038009
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation ar	nd a check for:	_
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
FROM:	Demetria L Name	LOUSIS (Printed or typed)		I
-	Newberry , F city, 352-33	iddress FL 32669 State & Zip 1-5339	CRETARY OF	OT DES TO BUS A
	Daytime To	elephone number	σ	<b>&gt;</b>

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

G BULLOCK DEC 1 0 2001



ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME FILED
The name of the corporation shall be:
The name of the corporation shall be:  Five Element Acapaneture, Inc.  SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
1805 SW 131st St., Newberry, FL 32669
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Any lawful business
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):
- Demetria Denise Laousi's
- 1805 S.W. 131st St., Wewberry, FL 32669
- President
ARTICLE VI REGISTERED AGENT
The <u>name and Florida street address</u> of the registered agent is:
Demetria Denise Laousis
1805 S.W. 131st St., Newberry, FL 32669
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
Demetria Denise Laousis
1805 Sw 131st St., Newberry, FL 32669
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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

| 12/6/0/|
| 8ignature/Registered Agent | Date |
| Signature/Incorporator | Date |