

Capitol Services, Inc.

1406 Hays St., Suite 2

Tallahassee, FL 32301

(850) 878-4734
Kathi or Brent

Pod 000103020

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Cedarwoods Day Spa & Wellness Center, Inc.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 9/23

☒ Certified Copy

☐ Mail Out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

☒ Profit

☐ Not for Profit

☐ Limited Liability

☐ Domestication

☐ Other

AMENDMENTS

☐ Amendment

☐ Resignation of R.A., Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

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*****78.75 *****78.75

w02-27602
9/23
gr

Examiner's Initials



Resubmit

FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

September 23, 2002

Please back date

CAPITOL SERVICES, INC.

SUBJECT: CEDARWOODS DAY SPA & WELLNESS CENTER, INC.
Ref. Number: W02000027602

RECEIVED
02 SEP 24 AM 11:19
TALLAHASSEE, FLORIDA

We have received your document for CEDARWOODS DAY SPA & WELLNESS CENTER, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated in your document is not an active entity according to our records. Please reinstate this entity (call (850) 245-6059 for information) or designate another entity that is active according to our records.

The name of the entity must be identical throughout the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum
Document Specialist
New Filing Section

Letter Number: 202A00053943

ARTICLES OF INCORPORATION

OF

CEDARWOODS DAY SPA & WELLNESS CENTER, INC.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I - NAME

The name of the corporation shall be

CEDARWOODS DAY SPA & WELLNESS CENTER, INC.

and the initial principle place of business of this Corporation shall be 10046 Griffin Road, Cooper City, Florida 33328.

ARTICLE II - NATURE OF BUSINESS

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1000 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV - ADDRESS

The street address of the initial registered agent of the corporation shall be 9141 Taft Street, Pembroke Pines, Florida 33024 and the name of the initial Registered Agent for the corporation at that address is **VINCENT T. SAMMARCO, Esq.**

ARTICLE V - TERM OF EXISTENCE

This corporation shall exist perpetually.

FILED
04 SEP 23 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI - DIRECTORS

The Board of Directors shall consist of 2 members. The number of Directors may be increased or decreased from time to time by vote of the stockholders. The name and address of the director constituting the Board of Directors is:

<u>NAME</u>	<u>ADDRESS</u>
PAULA GUILLEN	9041 S.W. 54 th St. Cooper City, Florida 33328
VIDALINA MALAISE	4197 Staffhorn Lane Weston, Florida 33331

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02 SEP 23 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII- OFFICERS

The following are the names of the Officers:

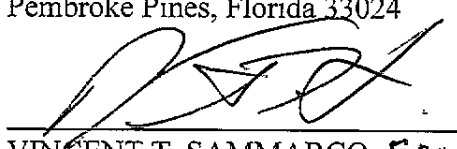
PRESIDENT/DIRECTOR	VIDALINA MALAISE
SECRETARY/TREASURER/DIRECTOR	PAULA GUILLEN

ARTICLE VIII- INCORPORATOR

THE NAME AND ADDRESS OF THE PERSON SIGNING THESE ARTICLES OF INCORPORATION IS:

<u>NAME</u>	<u>ADDRESS</u>
Vincent T. Sammarco, Esq.	9141 Taft Street Pembroke Pines, Florida 33024


DATE: 9/19/02


VINCENT T. SAMMARCO, Esq.

ACCEPTANCE OF REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR REEFER DR. INC., AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, **VINCENT T. SAMMARCO, Esq.**, AGREES TO ACT IN THIS CAPACITY, AGREES TO COMPLY WITH THE PROVISIONS OF SECTION 48.091 RELATIVE TO KEEPING OPEN SUCH OFFICE.

DATE: 9/19/02


VINCENT T. SAMMARCO