

P03000063740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

sense of serenity,  
Inc.

Office Use Only

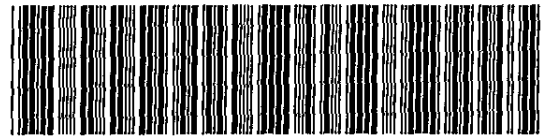
Yvette O'Brien  
GAVE

AUTHORIZATION BY PHONE TO

CORRECT corp name

DATE 6-10-03

DOC. EXAM g



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06/05/03--01035--006 \*\*/8.15

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SECRETARY OF STATE  
HALLMARK BUILDING

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## TRANSMITTAL LETTER

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

SUBJECT: Sense Of Serenita 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:

Walter V. O'Brien  
Name (Printed or typed)

P.O. Box 280429  
Address

Tampa, Florida 33682  
City, State & Zip

(813) 477-0362  
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:

*Sense Of Serenity Inc.*

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*P.O. Box 280429  
Tampa, FL 33682*

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*MASSAGE Therapy.*

## ARTICLE IV SHARES

The number of shares of stock is:

*1 stock at \$1.00*

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

*Yvette V. O'Brien President/LMT*

## ARTICLE VI REGISTERED AGENT

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

*8908 N. Dexter Ave Yvette V. O'Brien  
Tampa, FL 33604*

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Yvette V. O'Brien  
8908 N. Dexter Ave  
Tampa, FL 33604*

\*\*\*\*\*

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

*Yvette V. O'Brien*  
Signature/Registered Agent

*6-3-03*  
Date

*Yvette V. O'Brien*  
Signature/Incorporator

*6-3-03*  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA