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(Business Entity Name)		
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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BoMar Tax Service

P. O. BOX 1040 SEFFNER, FLORIDA 33583-1040

Telephone 813-654-1040

Fax 813-653-4486

June 6, 2003

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

Dear Sir/Madam:

Enclosed please find Articles of Incorporation for **HEALING WITH METAPHYSICS**, **INC**.

We are enclosing remittance in the amount of \$78.75 to cover the following filing fees:

Profit Corporation Filing Fee	\$35.00
Certificate Designating Registered Agent	35.00
Certified Copy of Articles of Incorporation	<u>8.75</u>
Total Enclosed	\$78.75

Please direct your response to the undersigned at:

P.O. Box 1040 Seffner, Florida 33583-1040

Sincerely,

R. H. "Bob" Meeks

ARTICLES OF INCORPORATION FOR HEALING WITH METAPHYSICS, INC.

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

ARTICLE I. NAME AND PRINCIPAL ADDRESS

HEALING WITH METAPHYSICS, INC., with principal offices located at 4670 YARMOUTH AVE. S., ST. PETERSBURG, FLORIDA 33711, shall be the name of this corporation.

ARTICLE II. DURATION

This corporation shall have perpetual existence.

ARTICLE III. PURPOSE

This corporation is organized for the purpose of engaging in all lawful business permitted to a corporation organized under the Florida General Corporation Law, as in effect from time to time.

ARTICLE IV. CAPITAL STOCK AUTHORIZED

This corporation is authorized to issue one thousand (500) shares of one dollar (\$1.00) per share par value common stock.

ARTICLE V. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 4670 YARMOUTH AVE. S., ST. PETERSBURG, FLORIDA 33711 and LARRY DAVIDSON is the name of the initial registered agent of this corporation at that address.

ARTICLE VI. INITIAL BOARD OF DIRECTORS

The number of members of the initial Board of Directors shall be one (1). The number of Directors may be increased or decreased from time to time by a resolution of the majority of the stockholders but shall never be less than one (1). The name of each initial director of this corporation and addresses are:

LARRY DAVIDSON 4670 YARMOUTH AVE. S. ST. PETERSBURG, FLORIDA 33711

ARTICLE VII. INCORPORATORS

The name and address of the person signing these Articles of Incorporation is:

LARRY DAVIDSON 4670 YARMOUTH AVE. S. ST. PETERSBURG, FLORIDA 33711

IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of May, 2003.

Jamy Manida (Seal)

STATE OF FLORIDA COUNTY OF HILLSBOROUGH

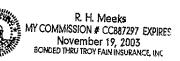
I HEREBY CERTIFY that before me, the undersigned authority, personally appeared **LARRY DAVIDSON**, to me known to be the person described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that said person subscribed to those Articles of Incorporation for the uses and purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this 3/2day of May, 2003.

NOTARY PUBLIC

State of Florida at Large My Commission Expires:

SEAL



Certificate designating place of business or domicile for the service of process within Florida, naming Agent upon whom process may be served.

In compliance with Section 607.325, Florida Statutes, the following is submitted:

First that the HEALING WITH METAPHYSICS, INC., with its place of business at 4670 YARMOUTH AVE. S., ST. PETERSBURG, FLORIDA 33711, has named LARRY DAVIDSON, located at 4670 YARMOUTH AVE. S., ST. PETERSBURG, FLORIDA 33711, as its Agent to accept service of process within Florida.

SIGNATURE: Lang Davidson

** ***, ** . * .

TITLE: PRESIDENT

MAY₹/ ,2003 DATE:

Having been named to accept service of process for the above stated corporation. at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 607.325, Florida Statutes.

SIGNATURE: Zamy Maudson?

DATE: MAY 31, 2003