

P03000147419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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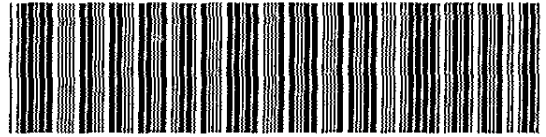
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

✓

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TRANSMITTAL LETTER

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

SUBJECT: Healthy Skin Body & Mind Specialist Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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:

Patricia E. Gil

Name (Printed or typed)

6245 S.W. Kendale Lake Circle  
Suite A-215

Address

MIAMI, FL 33183

City, State & Zip

(305) 951-9789

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:

Healthy Skin Body & Mind Specialist Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6245 S.W. Kendale Lake Circle Suite A-215  
MIAMI, FL 33183

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Lawfull Business

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Patricia E. Gil (President) Rita Y. Suarez (VP)  
6245 S.W. Kendale Lake Circle 6245 S.W. Kendale Lake  
Suite A-215 Circle  
MIAMI, FL 33183 MIAMI, FL 33183

## ARTICLE VI REGISTERED AGENT

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

Ania Morales & Associates  
1535 S.W. 41st Terrace  
MIAMI, FL 33185

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Patricia E. Gil  
6245 S.W. Kendale Lake Circle Ste A-215  
MIAMI, FL 33185

\*\*\*\*\*

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

Signature/Registered Agent

Signature/Incorporator

Date

Date

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9/23/03

9/23/03