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12/12/03--01047--004 **78.75

EFFECTIVE DATE

412-23

TRANSMITTAL LETTER

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

SUBJECT: Body	/ B Well, Inc.				
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the a	rticles of incorporation and	a check for		
211010000000000000000000000000000000000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	The state of the s			
□ \$70.00	☑ \$78.75	\$78.75	□ \$87.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
Ü	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of		
			Status		
		ADDITIONAL CO	PY REQUIRED		
FROM: M	onna Murrell, President				
	Nar	ne (Printed or typed)			
	E450 0 E1. (d. A 0)	- 400			
5150 S. Florida Ave., Ste. 103					
7		Address			
	Lakeland, Fl. 33813				
		ty, State & Zip			
	Ci	ey, butte to Eup			
	863-709-0613				
	Daytime	e 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:

Body B Well, Inc.

(effective date 01/01/04)

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 5150 S. Florida Ave., Ste. 103, Lakeland, Fl. 33813

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Massage therapy office

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):
Monna Murrell, 5435 Rebecca Lane, Apt. A, Lakeland, Fl. 33813

1-1-04

ARTICLE VI REGISTERED AGENT

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

Monna Murrell, 5150 S. Florida Ave., Ste. 103, Lakeland, Fl. 33813

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Monna Murrell, 5150 S. Florida Ave., Ste. 103, Lakeland, Fl. 33813

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

14/9/03

10/9/03

Date

O3 DEC 12 PM 2: SECRETARY OF STATE