

P04000124004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

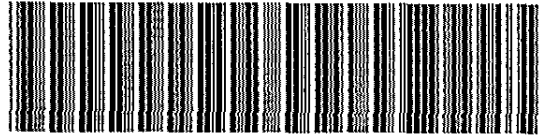
(Business Entity Name)

(Document Number)

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

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08/27/04--01065--004 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 AUG 27 PM 3:25

FILED

*TH 8/27/04*

**TRANSMITTAL LETTER**

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

SUBJECT: Healing Divas 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: Alexa St. John  
Name (Printed or typed)

13651 Gulf Breeze St.  
Address

Fort Myers, FL 33907  
City, State & Zip

239-297-2272  
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)

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Healing Divas Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

13651 Gulf Breeze St. Fort Myers FL 33907

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any Activity permitted and transact any or all lawfull business for which corps may be incorporated under Chapter 607 Fs.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Alexa St. John President  
13651 Gulf Breeze St.  
Fort Myers, FL 33907

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Alexa St. John  
13651 Gulf Breeze St.  
Fort Myers, FL 33907

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Alexa St. John  
13651 Gulf Breeze St.  
Fort Myers, FL 33907

\*\*\*\*\*  
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

Alexa St. John  
Signature/Registered Agent Alexa St. John

8/18/4  
Date

Alexa St. John  
Signature/Incorporator Alexa St. John

8/18/4  
Date