

PO4000169964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

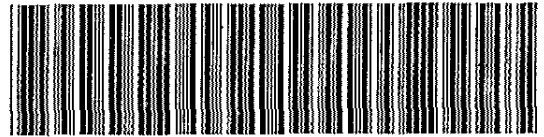
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100039769161

08/02/04--01039--003 **87.50

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 DEC 20 AM 8:52

ym 12/21

TRANSMITTAL LETTER

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

EIN # 20-1283466

SUBJECT: Tampa Bay Spa, 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: Ann Gacek

Name (Printed or typed)

1469 Fawn Hallow Ln.

Address

Woodbridge, Va 221191

City, State & Zip

540-295-0504

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
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 DEC 20 AM 8:52

ARTICLE I NAME

The name of the corporation shall be:

#1 Tampa Bay Spa, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6102 Adamo Dr. #3 A1
Tampa, Fl 33612

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Licensed Massage Therapy

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):

Ann Gacek-President
Ann Gacek-Vs. President
Ann Gacek-Secretary

ARTICLE VI REGISTERED AGENT

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

~~Ann Gacek-1469 Fawn Hollow Ln., Woodbridge, Va 22191~~

Charlene Taylor

1107 Swan ST Melbourne FL

32935

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ann Gacek-1469 Fawn Hollow Ln., Woodbridge, Va 22191

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

Charlene Taylor

Charlene Taylor

Date

24/06/04

Signature/Incorporator

Date

24/06/04