

PD5000093553

(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



400055537284

06/02/05--01007--005 **78.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 JUN 30 AM 9:50

005-27468

MRS
71

TRANSMITTAL LETTER

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

SUBJECT: Healing Hands massage by Diana, 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: Diana L. Smith
Name (Printed or typed)

5109 Harrison Street
Address

Hollywood FL 33021
City, State & Zip

Home 954 893 0692 / 954-559-3561 cell
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 2, 2005

DIANA L. SMITH
5109 HARRISON STREET
HOLLYWOOD, FL 33021

SUBJECT: HEALING HANDS MASSAGE BY DIANA, INC.
Ref. Number: W05000027468

We have received your document for HEALING HANDS MASSAGE BY DIANA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist
New Filings Section

Letter Number: 305A00039214

RECEIVED
05 JUN 30 AM 10:55
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN 30 AM 9:50

ARTICLE I NAME

The name of the corporation shall be:

Healing Hands massage by Diana, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5109 Harrison St
Hollywood, FL 33021

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Starting a business for massage.

ARTICLE IV SHARES

The number of shares of stock is:

10 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President:
Diana L. Smith, massage therapist License # MA43432, I will be
5109 Harrison St the owner.
Hollywood, FL 33021

ARTICLE VI REGISTERED AGENT

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

Diana L Smith
5109 Harrison Street
Hollywood, FL 33021

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Diana L Smith
5109 Harrison St
Hollywood FL 33021

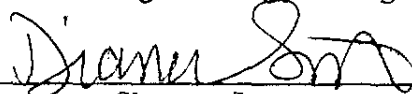
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

5/28/05

Date



Signature/Incorporator

5/28/05

Date