

PD5000138651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

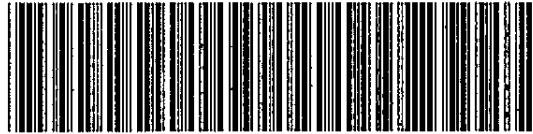
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/29/05--01042--025 **87.50

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 OCT 10 PM 1:39

MPS
10/12

05-45250

COVER LETTER

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

SUBJECT: SIX DIMENSIONS, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: REBECCA S. JOHNSON
Name (Printed or typed)

6765 SW 34 STREET
Address

MIAMI, FL 33155
City, State & Zip

(305) 297-5758
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 30, 2005

REBECCA S JOHNSON
6765 SW 34 STREET
MIAMI, FL 33155

SUBJECT: SIX DIMENSIONS, INC.
Ref. Number: W05000045250

We have received your document for SIX DIMENSIONS, INC. and your check(s) totaling \$87.50. 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: 405A00059678

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 OCT 10 PM 1:39

ARTICLE I NAME

The name of the corporation shall be:

Six Dimensions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6765 SW 34 Street
Miami, FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide health and wellness services to the community,
such as: wellness coaching, personal training & group
instruction.

ARTICLE IV SHARES

The number of shares of stock is:

~~(RST) NAME.~~ 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rebecca S. Johnson, Owner of Business

ARTICLE VI REGISTERED AGENT

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

Rebecca S. Johnson
6765 SW 34 Street
Miami, FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rebecca S. Johnson
6765 SW 34 Street
Miami, FL 33155

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

RSJoh
Signature/Registered Agent

RSJoh
Signature/Incorporator

9/26/05
Date
9/26/05
Date