## Pobooo48298

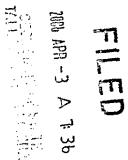
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Certificates of Status				
Special Instructions to Eiling Officer				
Special Instructions to Filing Officer:				

Office Use Only



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## TRANSMITTAL LETTER

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

SUBJECT: HOT BODYZ INC.				
Enclosed is an origin	(PROPOSED CORPORATE  nal and one(1) copy of the artic		-	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:  AMELIA Mowky  Name (Printed or typed)  1628 Sweet Sire Dr.  Address				
	Trivity	Address  F) 34655 State & Zip		

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: HOT BODYZ INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1628 SweetSAM DO ARTICLE III PURPOSE The purpose for which the corporation is organized is: TANNING Salon ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): REGISTERED AGENT The name and Florida street address of the registered agent is: ANDELA MOWRY 1628 SweetspireD. Trivity Fl. 34655 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: ANGELA MOWRY 1628 Sweet Spine Dr. Trinity fi 34655

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 Theorphysicator

3/16/00