

POL000124371

(Requestor's Name)

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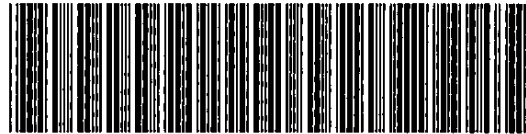
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers SEP 28 2006

TRANSMITTAL LETTER

25 September 2006

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: **Bodylogic of Tampa, Inc**

Enclosed is an original (and one (1) copy*) of the articles of incorporation of the above referenced entity and an check for:

<input checked="" type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$122.50 Filing Fee & Cert. Copy*
<input type="checkbox"/> \$78.75 Filing Fee & Certificate	<input type="checkbox"/> \$131.25 Filing Fee, Cert. Copy & Certificate*

**Additional Copy of Articles Required*

Thank you in advance for your cooperation in this matter. Please address all correspondence and questions to:

Rachel R. Fox
1300 S Evergreen Ave.
Clearwater, FL 33756
Tele. 727-204-1562

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation shall be:

Bodylogic of Tampa, Inc

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1300 S Evergreen Ave. Clearwater, FL 33756

ARTICLE III: SHARES

The number of shares of stock authorized to be outstanding at one time is:

1,000

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

Rachel R. Fox 1300 S Evergreen Ave. Clearwater, FL 33756

ARTICLE V: INCORPORATOR

Rachel R. Fox 1300 S Evergreen Ave. Clearwater, FL 33756

ARTICLE VI: EFFECTIVE DATE

The effective date of these filings shall be: **Upon Receipt**

Rachel R. Fox

Signature/Incorporator

Sept. 26, 2006

Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Rachel R. Fox

Signature/Registered Agent

Sept. 26, 2006

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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