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(Requestor's Name)

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(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

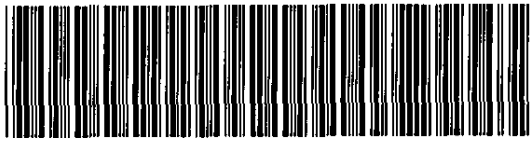
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07 MAR -2 PM 1:55  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 MAR -2 AM 10:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Kathy's Healing Hands, Inc.

- Art of Inc. File \_\_\_\_\_
- LTD Partnership File \_\_\_\_\_
- Foreign Corp. File \_\_\_\_\_
- L.C. File \_\_\_\_\_
- Fictitious Name File \_\_\_\_\_
- Trade/Service Mark \_\_\_\_\_
- Merger File \_\_\_\_\_
- Art. of Amend. File \_\_\_\_\_
- RA Resignation \_\_\_\_\_
- Dissolution / Withdrawal \_\_\_\_\_
- Annual Report / Reinstatement \_\_\_\_\_
- Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- Certificate of Good Standing \_\_\_\_\_
- Certificate of Status \_\_\_\_\_
- Certificate of Fictitious Name \_\_\_\_\_
- Corp Record Search \_\_\_\_\_
- Officer Search \_\_\_\_\_
- Fictitious Search \_\_\_\_\_
- Fictitious Owner Search \_\_\_\_\_
- Vehicle Search \_\_\_\_\_
- Driving Record \_\_\_\_\_
- UCC 1 or 3 File \_\_\_\_\_
- UCC 11 Search \_\_\_\_\_
- UCC 11 Retrieval \_\_\_\_\_
- Courier \_\_\_\_\_

Signature \_\_\_\_\_

Requested by: SP  
Name \_\_\_\_\_ Date 3/2/07 Time 12:15

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 5, 2007

CAPITAL CONNECTION, INC.  
ATTN: SP

**RE-SUBMIT**  
PLEASE OBTAIN THE ORIGINAL  
FILE DATE.

SUBJECT: KATHY'S HEALING HANDS INC  
Ref. Number: W07000010883

We have received your document for KATHY'S HEALING HANDS INC. However, the document has not been filed and is being returned for the following:

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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) 245-6934.

Loria Poole  
Document Specialist  
New Filing Section

Letter Number: 307A00015503

**RE-SUBMIT**  
PLEASE OBTAIN THE ORIGINAL  
FILE DATE.

**RECEIVED**  
07 MAR -5 PM 3:49  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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:  
Kathy's Healing Hands Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:  
1292 Key Deer Blvd.  
Big Pine Key, FL 33043

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
To engage in lawful business activity for which corporations may be incorporated under the Florida General Incorporation Act.

**ARTICLE IV SHARES**

The number of shares of stock is:  
500 shares at \$1.00 each.

**ARTICLE V INTIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
Kathy Bansen, PO Box 431477, Big Pine Key, FL 33043. President, Treasurer, & Secretary

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:  
Kathy Bansen  
1292 Key Deer Blvd.  
Big Pine Key, FL 33043

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
Kathy Bansen  
PO Box 431477  
Big Pine Key, FL 33043

\*\*\*\*\*

*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*

Kathy Bansen  
Signature/Registered Agent

2/28/07  
Date

Kathy Bansen  
Signature/Incorporator

2/28/07  
Date

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SECRETARY OF STATE  
FALLAHASSEE, FLORIDA