

P07000113324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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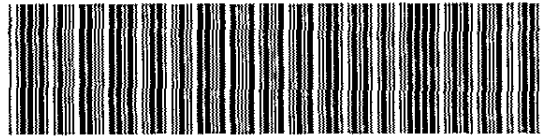
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 OCT 15 AM 8:55

gt 10/16/07

COVER LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 OCT 15 AM 8:55

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

SUBJECT: NEEDLES & MOXA WELLNESS CENTER, 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: Eva Paglialonga Novotna

Name (Printed or typed)

1317 Obispo Av.

Address

Coral Gables, FL, 33134

City, State & Zip

786-556-3800

Daytime Telephone number

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)

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DIVISION OF CORPORATIONS

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ARTICLE I NAME

The name of the corporation shall be:

NEEDLES & MOXA WELLNESS CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Place of business address: 5701 SW 8th Street, #700, Miami, FL, 33144

The mailing address of the corporation is: 1317 OBISPO AV., CORAL GABLES, FL, 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ACUPUNCTURE & MASSAGE THERAPY

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

EVA PAGLIALONGA NOVOTNA, P
1317 OBISPO AV.
CORAL GABLES, FL, 33134

EVA PAGLIALONGA NOVOTNA, SEC
Address: the same

EVA PAGLIALONGA NOVOTNA, TRE
Address: the same

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
EVA PAGLIALONGA NOVOTNA, A.P.
1317 OBISPO AV.
CORAL GABLES, FL, 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
EVA PAGLIALONGA NOVOTNA, A.P.
1317 OBISPO AV.
CORAL GABLES, FL, 33134

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

Eva Paglialonga Novotna

Signature/Registered Agent

10/11/2007

Date

Eva Paglialonga Novotna

Signature/Incorporator

10/11/2007

Date

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DIVISION OF CORPORATIONS
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