

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP      ☐ WAIT      ☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
08 JAN 25 AM 11:09

## COVER LETTER

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

SUBJECT: Sarasota Healing Arts 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: Russell A. Finger

Name (Printed or typed)

2140 Hillview St.

Address

Sarasota, FL 34239

City, State & Zip

941-993-9932

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)

### **ARTICLE I      NAME**

The name of the corporation shall be:

Sarasota Healing Arts Inc.

### **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2140 Hillview St. Sarasota, FL 34239

### **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:  
any and all lawful business.

### **ARTICLE IV      SHARES**

The number of shares of stock is:

100 common shares

### **ARTICLE V      INITIAL OFFICERS AND/OR DIRECTORS**

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

Jessica B. Lipham  
2140 Hillview St. Sarasota, FL 34239  
President

Russell A. Finger  
2140 Hillview St. Sarasota, FL 34239  
Secretary

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**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:  
Russell A. Finger 2140 Hillview St. Sarasota, FL 34239

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:  
Russell A. Finger 2140 Hillview St. Sarasota, FL 34239

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*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*

Russell A. Finger  
Signature/Registered Agent

Russell A. Finger  
Signature/Incorporator

1-10-08  
Date

1-10-08  
Date

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