10800002865

(Re	questor's Name)			
(Ad	dress)			
(Ad	ldress)	,		
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
,				





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EP 3/18/08

COVER LETTER

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

SUBJECT: Wellness Massage Studius - University Shoppes Inc. (PROPOSED CORPORATE NAME-MUSI INCLUDE SUFFIX) Wellness Massage Studios - University Shoppes, Inc.					
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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
	1		,		
FROM: Cheryl A. BADIAY_ Name (Printed or typed)					
Address Address					
Engkwood, FC 34223 City, State & Zip					
Daytime Telephone number					
. P	lease send All Co	Mespondance Address	10 Above		

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

The name of the corporation shall be:

Massage Studios-University Shoppes, Jac. wellness

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

8/09 cooper Creek Boulevaro University Park, FL 3/201

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: provide therapeutic massages to customers ; sales of merchanoise, any + all lauful Business.

The number of shares of stock is: 100 Shares common Stock, no par

INITIAL OFFICERS AND/OR DIRECTORS

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

Cheryl A. BADIALI, President, treasurer, clerk.

60 Windsor Drive

ENEWOOD, FL 34223

ARTICLE VI	REGISTERED AGENT				
The name and Flor	rida street address (P.O. Box NOT acceptable) of the r	registered agent is:			
	Cheryl BADiali 62 windso Englo	(Dr 24223			
ARTICLE VII	INCORPORATOR				
The name and add	Iress of the Incorporator is:				
***	Chenyl BADIAU Gd WINDSUR Dr.	FZ 3/223			
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					
<u> </u>	Mariotand Agent A Balcal	<u>3 -/3-08</u> Date			
Signatur	re/Registered Agent //	_			
	Chy a Badeal	3-13-08			
Signatur	re/Incorporator U	Date			

DIVISION OF CORPORATIONS