

P08000044827

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

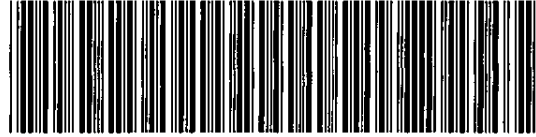
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900126155649

05/01/08--01027--004 **78.75

FILED

2008 MAY -2 PM 12:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

cf. 55

COVER LETTER

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

SUBJECT: SPA 360°
(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: CHRISTINA PAYLAN, MD
Name (Printed or typed)

3230 W. Kennedy Blvd
Address

TAMPA, FL 33609
City, State & Zip

813-874-2826
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2008

CHRISTINA PAYLAN, MD
3230 W. KENNEDY BLVD.
TAMPA, FL 33609

SUBJECT: SPA 360 INC
Ref. Number: W08000022075

We have received your document for SPA 360 INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We can not put the degree sign in your corporation name. Our computer does not have the degree symbol. Please adapt your name if you need to. I was unable to reach you by phone.

Please return the corrected 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
New Filing Section

Letter Number: 108A00027671

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

2008 MAY -2 PM 12:39

ARTICLE I NAME

The name of the corporation shall be:

SPA 360 INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

3230 W. Kennedy Blvd Tampa, FL 33609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Medical SPA to provide Medical facials, body treatments.

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):

President & CEO - CHRISTINA PAVLAN, MD

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

CHRISTINA PAVLAN, MD
3226 W. Kennedy Blvd Tampa, FL 33609

ARTICLE VII INCORPORATOR

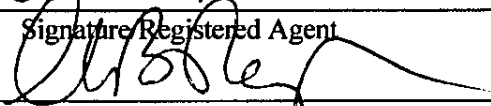
The name and address of the Incorporator is:

CHRISTINA PAVLAN, MD
3226 W. Kennedy Blvd Tampa, FL 33609

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



Signature Registered Agent



Signature/Incorporator

4/29/08

Date
4/29/08

Date