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COVER LETTER

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

SUBJECT: BODYV	VORKS BY SANDRA, INC. (PROPOSED CORPOR	ATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: SA	ANDRA MOONAN Name	e (Printed or typed)	
	4340 NW 5TH AVE	Address	- 10 10.
	POMPANO BEACH FL 33064 City	y, State & Zip	
	954-934-3209 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

The name of the corporation shall be:

BODYWORKS BY SANDRA, INC

ARTICLE II PRINCIPAL OFFICE

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

4340 NW 5TH AVE POMPANO BEACH FL 33064

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: TO PROVIDE BODY MASSAGE AND AESTHETIC SERVICES TO INDIVIDUALS

ARTICLE IV SHARES

The number of shares of stock is: 10000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): SANDRA MOONAN, PRESIDENT **4340 NW 5TH AVE** POMPANO BEACH FL 33064

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: SANDRA MOONAN **4340 NW 5TH AVE** POMPANO BEACH FL 33064

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: **ALLAN OCHOA** 6280 KIMBERLY BLVD **NORTH LAUDERDALE FL 33064**

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

Date