# P08000097571

| (Requ                      | uestor's Name)  |             |
|----------------------------|-----------------|-------------|
| (Addi                      | ress)           |             |
| · (Addı                    | ress)           |             |
| (City/                     | State/Zip/Phon  | e #)        |
| PICK-UP                    | WAIT            | MAIL        |
| (Busi                      | ness Entity Nar | me)         |
| (Doci                      | ument Number)   |             |
| Certified Copies           | Certificates    | s of Status |
| Special Instructions to Fi | ling Officer:   |             |
|                            |                 | İ           |
|                            |                 |             |
|                            |                 |             |

Office Use Only



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# **COVER LETTER**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

08 OCT 29 AM II: 47

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

| SUBJECT: MY M        | ASSAGE SPA INC.                            | TOTAL MUST INCI                                    | UDE CHEEN  |
|----------------------|--|--|--|
| Enclosed are an orio | (PROPOSED CORPORA                          |  |  |
| \$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 |
| FROM:                | MARTHA AIELLO Name (Printed or typed)      |  |  |
|                      | 8113 SPAINISH OAK DRIVE Address            |  |  |
|                      | SPRING HILL, FL 34606  City, State & Zip   |  |  |
|                      |  | -346-4363<br>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)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

### ARTICLE I NAME

08 OCT 29 AMII: 47

The name of the corporation shall be:

MY MASSAGE SPA INC.

### ARTICLE II PRINCIPAL OFFICE

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

8113 SPANISH OAK DRIVE SPRING HILL, FL 34606

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

THE CORPORATION IS FORMED FOR THE PURPOSE OF TRANSACTING ANY AND ALL LAWFUL BUSINESS.

### ARTICLE IV SHARES

The number of shares of stock is: ONE HUNDRED (100)

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): MARTHA L. AIELLO 8113 SPANISH OAK DRIVE SPRING HILL, FL 34606

### ARTICLE VI REGISTERED AGENT

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

MARTHA L. AIELLO 8113 SPANISH OAK DRIVE SPRING HILL, FL 34606

### ARTICLE VII **INCORPORATOR**

The <u>name and address</u> of the Incorporator is: MARTHA L. AIELLO 8113 SPANISH OAK DRIVE SPRING HILL, FL 34606

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