

P09000065135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

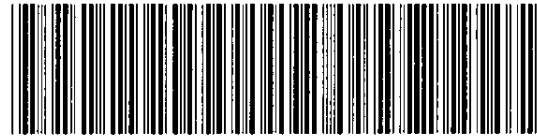
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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07/31/09--01015--014 \*\*78.75

RECEIVED  
09 JUL 31 AM 10:43  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
2009 JUL 31 A 9:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG -3 2009  
D. A. WHITE

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. PROFESSIONAL MASSAGE &  
(Corporation Name) (Document #)

2. THERAPY CENTER, INC  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

### NEW FILINGS

☒ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

### OTHER FILINGS

☐ Annual Report  
☐ Fictitious Name

### AMENDMENTS

☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

### REGISTRATION/QUALIFICATION

☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

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TALLAHASSEE, FLORIDA

## **ARTICLES OF INCORPORATION**

The undersigned Incorporator (s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### **ARTICLE I – NAME**

The name of the corporation shall be:

**Professional Massage & Therapy Center, Inc**

### **ARTICLE II- PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

1303 Homestead Rd. N. Suite #102  
Lehigh Acres, FL 33936

### **ARTICLE III- SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100- \$5.00 Value

### **ARTICLE IV – INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

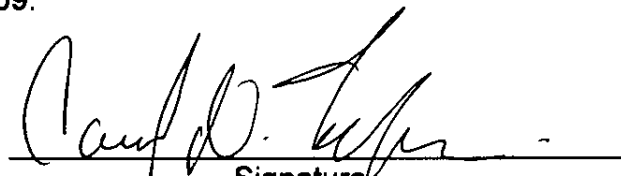
Carol Tofino  
1303 Homestead Rd. N. Suite #102  
Lehigh Acres, FL 33936

## **ARTICLE V – INCORPORATOR**

The name and street address of the incorporator to these Articles of Incorporation is:

Carol Tofino  
1303 Homestead Rd. N. Suite # 102  
Lehigh Acres, FL 33936

The undersigned incorporator has executed these Articles of Incorporation this 29<sup>th</sup> day of July, 2009.

  
Signature

## **ARTICLE VI – DIRECTOR (S)**

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

President: Carol Tofino

1303 Homestead Rd. N. Suite # 102  
Lehigh Acres, FL 33936

## **CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/ REGISTERED OFFICE:**

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

  
Registered Agent Signature

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