

P1 00000002231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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10 JAN 11 AM 11:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1-12-10 OK

## COVER LETTER

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

**SUBJECT:** OBT SPA, INC.

(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** PAUL H S KO

Name (Printed or typed)

933 SPRINGS CIR

Address

DEERFIELD BEACH, FL 33441

City, State & Zip

786-390-0216

Daytime Telephone number

SEOKYU@USA.NET

E-mail address: (to be used for future annual report notification)

**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 NAME**

The name of the corporation shall be:

OBT SPA, INC.

## **ARTICLE II PRINCIPAL OFFICE**

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

1580 NW BOCA RATON BLVD STE 6 BOCA RATON, FL 33432

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO TRANSACT ANY AND ALL LAWFUL BUSINESS, INCLUDING BUT LIMITED TO MASSAGE THERAPY.

## **ARTICLE IV SHARES**

The number of shares of stock is:

1000

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

PAUL H.S. KO, PRESIDENT

933 SPRINGS CIR DEERFIELD BEACH, FL 33441

## **ARTICLE VI REGISTERED AGENT**

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

PAUL H.S. KO

933 SPRINGS CIR DEERFIELD BEACH, FL 33441

## **ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

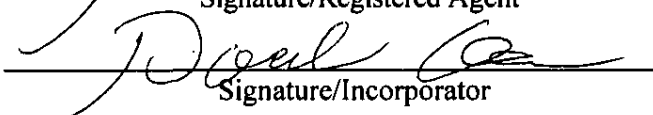
PAUL H.S. KO

933 SPRINGS CIR DEERFIELD BEACH, FL 33441

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*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

1/10/10  
Date

1/10/10  
Date

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TALLAHASSEE, FLORIDA