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PICK-UP	WAIT	MAIL			
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Certified Copies	Certificates	of Status			
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Special Instructions to	Filing Officer:				

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DIVISION OF CONFIGENTICE

of 3/14/10

COVER LETTER

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

SUBJECT: COCON	OUT PALMS MASSAGE OF STU (PROPOSED CORPORA	ART, INC TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
nclosed are an orig	inal and one (1) copy of the arti	icles of incorporation and	a check for		
anciosed are an orig	mar and one (1) copy or the arti	letes of meorporation and	a check for.	٦ .	
☑ \$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 CO			
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		e (Printed or typed)		2010 MAR 15	DIVISIO
1045 EAST OCEAN BLVD Address				\$	\sim
	•	Address		1	F C0%
STU	STUART, FL 34996			3	-(<u>`</u>
City, State & Zip				PM 4: 32	
<u>772</u> -	-283-9902				
	Daytime T	elephone number			
MAF	RCUSAA2302@COMCAST.NET				

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

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

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:

COCONUT PALMS MASSAGE OF STUART, INC

FILED SECRETARY OF STATE DIVISION OF CORPORATION

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ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1045 EAST OCEAN BLVD STUART, FL 34996

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is: TO OPERATE A FOR PROFIT MASSAGE BUSINESS

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):

PATTY A

GENTILE,

PRESIDENT

ARTICLE VI REGISTERED AGENT

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

PATTY A GENTILE

1045 EAST OCEAN BLVD

STUART, FL 34996

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PATTY A GENTILE

1045 EAST OCEAN BLVD

STUART, FL 34996

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

Laty Dentilo	3-10-10
Signature/Registered Agent	Date
Path Lentile	3.1010
/Signature/Incorporator	Date