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SECRETAHY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

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

SUBJECT: J. M. Massage World, Corp.				
(PROPOSED CORPORA	ΓΕ NAME – <u>MUST INC</u>	<u>LUDE SUFFIX</u> )		
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	id a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL C	OPY REQUIRED		
FROM: Jose M. Rodriguez Name	(Printed or typed)			
7116 S.W. 152nd Place	11	<del></del>		
Miami, FI 33193	ddress State & Zip			
305-763-9963  Daytime Te	lephone number			
jrshiatsu@gmail.com 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)

The name of the	e corporation shall be: J. M. Massage Worl	d, Corp.	
ARTICLE II	PRINCIPAL OFFICE	, <sub> </sub>	
	Principal street address		ress, if different is:
	7116 S.W. 152nd Place		Place
	Miami, FI 33193	Miami, FI 33193	
ARTICLE III	PURPOSE		
	r which the corporation is organized is: ALL LAWFUL BUSINESS		
ARTICLE IV	SHARES shares of stock is: 1		FILEI  11 OCT 27 I  SECRETARY C  TALLAHASSEE.
		MARG	HOF ST
	INITIAL OFFICERS AND/OR DIRECT Title: Jose M. Rodriguez		
Address:	7116 S.W. 152nd Place Miami, Fl 33193	Address:	
Name and Address:	l Title:	Name and Title:	
1100000			
Name and	l Title:	Name and Title:	
Address:		Address:	
ARTICLE VI	REGISTERED AGENT		· · · · · · · · · · · · · · · · · · ·
	Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Jose M. Rodriguez		
Address:	7116 S.W. 152nd Place Miami, Fl 33193		
ARTICLE VII	INCORPORATOR		
	address of the Incorporator is:		
Name:	Jose M. Rodriguez	<del></del>	
Address:	7116 S.W. 152nd Place Miami, Fl 33193	<del></del>	
Having been na this certificate, I	nmed as registered agent to accept service of pro am familiar with and accept the appointment as	ocess for the above stated corporat registered agent and agree to act in	tion at the place designated in n this capacity
	- / /alles		10/25/2011
	Required Signature/Registered Agent		Date
	ocument and affirm that the facts stated herein Department of State constitutes a third degree fo		
	- // Killeros	_)	10/25/2011
· · · · · · · · · · · · · · · · · · ·	Required Signature/Incorporator	<del>}</del>	Date