

PI200000489113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

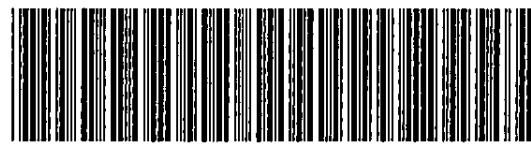
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/24/12--01022--001 **78.75

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12 MAY 24 PM 4:56
CLERK'S OFFICE, STATE OF SOUTH DAKOTA

5/25
8

COVER LETTER

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

SUBJECT: Soul to Soul Healing 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 & Certificate of
 Status Status

ADDITIONAL COPY REQUIRED

FROM: Jean Wanta

Name (Printed or typed)

627 Montego Road West

Address

Jacksonville, FL 32216

City, State & Zip

904-721-0184

Daytime Telephone number

jeno627@aol.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)

ARTICLE I NAME

The name of the corporation shall be **SOUL TO SOUL HEALING INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address
627 Montego Road West
Jacksonville, FL 32216

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Personal development

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Jean Wanta, CEO** Name and Title: _____
Address: **627 Montego Road West** Address: _____
Jacksonville, FL 32216 _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: **Jean Wanta**
Address: **627 Montego Road West**
Jacksonville, FL 32216

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Jean Wanta**
Address: **627 Montego Road West**
Jacksonville, FL 32216

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.

Jean Wanta

Required Signature/Registered Agent

5/21/12

Date

SEARCHED
INDEXED
FILED
SERIALIZED
JUN 1 2012
FLORIDA
DEPARTMENT OF STATE
REGISTRATION
AND REPORTING
SECTION

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Jean Wanta

Required Signature/Incorporator

5/21/12

Date