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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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Phone

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7 -6-11	Address.	

*FLORIDA PROFIT/NON PROFIT CORPORATION SASSON THERAPIST CORP.

Certificate of Status	0
Certified Copy	. 1
Page Count	03
Estimated Charge	\$78.75

Articles of Incorporation IN COMPLIANCE WITH CHAPTER 607 AND/OR CHAPTER 621, F.S.

Article I - Name: The name of the corporation shall be SUSSON Therapist Corp.	
Article II - Principal and Mailing Address 7821 COROL Way Suite 104 MIAMI FL 33155	
Article III - Shares The number of shares of stock is: \ Article IV - Initial Officers and/or Directors OSQUEL MORTINGE - CACCES ((P)
Article V - Registered Agent The name and Florida street address of the registered agent is: OSCUCL MORTINEZ- CACERES 12741 SW 209 St MIAMI FL 33177	TA JUL 23 PM 1: 31
Article VI - Incorporator The name and address of the incorporator is: OSQUEL MORTINEZ - COCE 12741 SW 209 St 12141 FL 33177	res

Required Signatures:

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

Date

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.

Date