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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 12000000019 Phone : (305)552-5973

Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION

AAA THERAPEUTIC MASSAGE INC

Certificate of Status	0
Certified Copy	1
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JAN 2 2 2016

T. SCOTT

Corporate Filing Menu

Help

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	•	•
ARTICLE I. NAME: The name of the corporation is: AAA Therapectic Massage INC.	:	
ARTICLE II PRINCIPAL OFFICE:		_
The principal street address and mailing address is:		
1112 N University DR.	. 	
Pembroke Pives 33024	 	
	 	
ARTICLE III SHARES: The number of shares of stock is:		
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICER	.	16 JAN 21
	<u>C3:</u>	2
Lydia E Perez - P	 _	
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	<u> </u>	
ARTICLE V INITIAL REGISTERED AGENT AND STREET A	DDRESS:	
The name and Florida street address (PO Box not acceptable) of the registe	ered agent is:	
Lydia & PEREZ	 	
1112 N University DR.	<u> </u>	
Pembroke Pines FL 33024	-	
ARTICLE VI INCORPORATOR: The name and address of the Inc	porator is:	
Lydia & PEREZ		
1112 N University Dr.		
Pombroke Pines FL 33024		

TH'1 6000017372

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

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 of hird degree felony as provided for in s.817.155, F.S.