

1/19/96

FLORIDA DIVISION OF CORPORATIONS  
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TO: DIVISION OF CORPORATIONS FROM: EMPIRE CORPORATE IT COMPANY

DEPARTMENT OF STATE

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STATE OF FLORIDA

MIAMI, FL 33135

409 EAST GAINES STREET

TALLAHASSEE, FL 32309

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PHONE: (305) 841-3094

FAX: (305) 841-3770

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: NATURAL HEALING MASSAGE, INC.

FAX AUDIT NUMBER: H96000000988

CURRENT STATUS: REQUESTED

DATE REQUESTED: 01/19/1996

TIME REQUESTED: 14:51:22

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CERTIFICATE OF STATUS: 0

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*WPA-1549*  
*R.A. Street Address*

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96 JAN 22 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Signature]*  
*1/22*

DIVISION OF CORPORATIONS

96 JAN 19 PM 4:03

RECEIVED



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Morham**  
**Secretary of State**

January 22, 1996

**EMPIRE CORPORATE KIT COMPANY**

**MIAMI, FL**

**SUBJECT: NATURAL HEALING MASSAGE, INC.**  
**REF: W96000001549**

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

The designation of the registered agent must be at a Florida street address.

**\*\*SEE R.A. ACCEPTANCE\*\*\*\*\***

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole  
Corporate Specialist

FAX Aud. #: H96000200988  
Letter Number: 696A00002636

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96 JAN 22 PM 2:15  
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TALLAHASSEE, FLORIDA

**CERTIFICATE OF INCORPORATION**

**-OF-**

**NATURAL HEALING MASSAGE, INC.**

I, the undersigned, for the purposes of forming a corporation under the Laws of the State of Florida, by and under the provisions of the Statutes of the State of Florida, providing for the formation, liability, rights, privileges, and immunities of Corporations for Profit.

**ARTICLE ONE**

The Name of the Corporation shall be **NATURAL HEALING MASSAGE, INC.**

**ARTICLE TWO**

The Corporation may engage in any activity or business permitted under the Laws of the State of Florida and the United States.

**ARTICLE THREE**

The Corporation is authorized to have 500 shares of stock at a Par Value of \$1.00 per share, outstanding.

**ARTICLE FOUR**

The Amount of Capital that which Corporation shall begin business with shall not be less than **FIVE HUNDRED DOLLARS (\$500.00)**.

**ARTICLE FIVE**

The Corporation shall have perpetual existence.

**ARTICLE SIX**

The registered office and principal place of business for this corporation shall be **850 N Miami Avenue, Apt#607, Miami, Florida 33136.**

Maria A. Zelaya, Esq.  
1441 NW N. RIVER DR.  
Miami, FL 33125  
(305) 324. 4111 / FBN. 0109725

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#### ARTICLE SEVEN

The number of Directors shall not be less than ONE.

#### ARTICLE EIGHT

The Names and Post Office addresses of the first Board of Directors, who subject to the provisions of the Certificate of Incorporation and by-laws of the Corporation Laws of the State of Florida, shall hold office for the First Year of the corporation's existence, or until their successor are elected and have qualified, are: Marlen Mesa, President, 850 N Miami Avenue, Apt#607, Miami, Florida 33136.

#### ARTICLE NINE

The Name and Address of the Subscriber to the Certificate of Incorporation is: Marlen Mesa, President, 850 N Miami Avenue, Apt#607, Miami, Florida 33136.

#### ARTICLE TEN

The Registered Agent for said Corporation is: Marlen Mesa, President, 850 N Miami Avenue, Apt#607, Miami, Florida 33136.


#### ARTICLE ELEVEN

The Corporation shall have all the rights and powers as Set Forth in the Florida Statutes, applicable to Corporations for Profit.

I THE UNDERSIGNED, being the original Subscriber to the Capital Stock hereinabove named for the purpose of Forming a Corporation for Profit to do business, both with and without the State of Florida, do hereby make, subscribe, acknowledge and file this certificate, hereby declaring that the facts herein stated are true, and have hereunto set my hand and seal this 04 day of

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January, 1996.

  
 MARLEN MESA

(Seal)

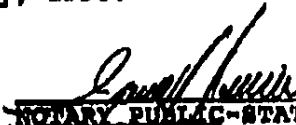
STATE OF FLORIDA )

COUNTY OF DADE )

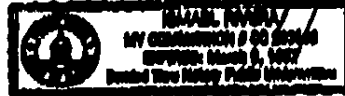
SS

ON THIS DAY, BEFORE ME, appeared: MARLEN MESA, FOLM200-540-61-878-0, the Party to the foregoing Certificate of Incorporation known to me personally to be such, and acknowledged the said Certificate to be free and voluntary act and Deed of them, and that each statement and fact are therein truly Set Forth.

WITNESS my hand and Notarial Seal at Miami, Dade County, Florida on this 21st day of January, 1996.

  
 NOTARY PUBLIC-STATE OF FLORIDA

My commission expires:



CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR DOMICILE FOR SERVICE OF PROCESS WITHIN THE STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First-That NATURAL HEALING MASSAGE, INC., desiring to organize under the laws of the State of Florida with its principal office, as indicated in the articles of incorporation at Miami, County of Dade, State of Florida has named Marlen Mesa, 850 N Miami Avenue, Apt#607, Miami, Florida 33136. , as its agent to accept service of process within this state.

## ACKNOWLEDGEMENT:

Having been named to accept service of process for the above stated corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the

provision of said Act relative to keeping open said office.

By:

  
MARLENE MESA  
Registered Agent

Prepared By:

LUX LAW  
Maria A. Selaya, Esquire  
Attorney at Law  
Florida Bar No. C109798  
1441 North River Drive  
Miami Florida 33125  
(305) 324-4111

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TALLAHASSEE, FLORIDA

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