# 7600012977 TRANSMITTAL LETTER ORIGINAL

Department of State Division of Corporations P. O. Box 6327 Tellahassee, FL 32314

SUBJECT: U.S. Mag				
(	Proposed corporate	name - must include suffix)	<b>65 (1) (</b> -02/0 ****	#78.75 ******** #78.75 **********
Enclosed is an origina	al and one (1) c	opy of the articles of incor	poration a	nd a check
for : \$70.00 Filing Fee	X \$78.75 Filing Fee & Certificate	\$122.50 \$	131.25 ng Fee, fied Copy erdificate	
FROM:	Thomas A. Sa	vino		
		(printed or typed)	<del></del>	
	2516 Scarlet	Oak Ct. Address		SSTEB-7 AMID: 58
	Sarasota, FL	34232		
	Ci	ty, State & Zip	<del></del>	
	(941)371-300	1 / (941)756-3582	_	
	Daytime	Telephone number .	<del></del>	8 NDA

SN FEB 1 2 1996

NOTE: Please provide the original and one copy of the articles.

### ARTICLES OF INCORPORATION

FILED

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

> ARTICLEI NAME

The name of the corporation shall be:

U.S. Massage, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

The Office Park 2477 Stickney Pt Rd, Suite 118A Sarasota, FL 34231

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

--100---(Common Stock)

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and address of the initial registered agent is:

> Thomas A. Savino 2516 Scarlet Oak Court Sarasota, FL 34232

### ARTICLE IVE CORPORATE PURPOSE STATEMENT

The purpose of the corporation is to engage in the professional practice of massage including but not limited to the manipulation of the tissues of the human body with the hand, foot, arm, elbow, whether or not such manipulation is aided by hydrotherapy, including colonic irrigation, or thermal therapy; any mechanical device or instrument; or the application to the human body of a chemical, herbal, or medicinal preparation. Other activities include but ar not limited to distribution and/or dispensing of health information including dietary, medicinal, and exercise instruction.

The foregoing purposes and activities will be intrepreted as examples only and not as limitations, and nothing therin shall be deemed as prohibiting the corporation from extending its activities to any related or otherwise permissible lawful business purposes which may become necessary, profitable or desirable for the furtherance of the corporate objectives expressed above.

## ARTICLE V INCORPORATOR(8) See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Thomas A. Savino 2516 Scarlet Oak Ct Sarasota, FL 34232 Cindy Knott 2755 Club Mar Drive, #3C Sarasota, FL 34237

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

27th day of January , 1996

Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: U.S. Massage, Inc.								
2. The name an	nd address of the registered agent and office is:	<del></del>						
	Thomas A. Savino (NAME)	TALL'AH)	10 01 01 10	J*1]				
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	AHASSEE		194				
	Sarasota, FL 34232 (CITY/STATE/ZIP)	FLORIDA	Fa 10: 59					

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) 1/27/96 (DATE)