May 23, 1996

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

Re: Healing Hands of Gold, Inc.

Please find enclosed the original and one copy of Articles of Incorporation of Healing Hands of Gold, Inc. together with my check in the amount of \$70.00, being Filing Fce (\$35.00) and Designation of Registered Agent Fce (\$35.00) for the said corporation. Your early attention will be much appreciated.

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Sincerely,

Daniel

Lisa T. Daniel

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ARTICLES OF INCORPORATION

OF

HEALING HANDS OF GOLD, INC.

The undersigned subscriber(s) being natural person(s) competent to enter into contracts, do hereby form a corporation under the Florida Business Corporation Act, and for this purpose hereby adopt(s) the following Articles of Incorporation.

ARTICLE I--CORPORATE NAME

The name of the corporation is HEALING HANDS OF GOLD, INC.

ARTICLE II--PRINCIPAL OFFICE

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

467 WALDEN CIRC. (APT. 325) ORLANDO, FL 32811

ARTICLE III--PURPOSE

The corporation is organized for the purpose of:

- Administering massage therapy, and 1.
- Engaging in any other activities of business permitted under the laws of the United States of 2. America and/or the State of Florida.

ARTICLE IV--CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED (500) shares of ONE DOLLAR (\$1.00) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V--INITIAL REGISTERED AGENT

The name and street address of the initial Registered Agent of the corporation is:

LISA T. DANIEL 4768 Walden Circ. (Apt. 325) Orlando, FL 32811

ARTICLE VI--INITIAL BOARD OF DIRECTORS

The corporation shall have ONE (1) director initially. The number of directors may be increased or diminished from time to time by the By-laws, but shall never be less than one (1). The name(s) and address(es) of the initial director(s) of the corporation is (are) as follows:

> LISA T. DANIEL 4768 Walden Circ. (Apt. 325) Orlando, FL 32811

ARTICLE VII--INCORPORATORS

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

> LI SA T. DANIEL 4768 Walden Circ. (Apt. 325) Orlando, FL 32811

IN WITNESS, WHEREOF, the undersigned subscriber(s) has (have) executed these Articles of Incorporation this 24 day of _______ 19 46

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Signature

Signature

Signature

STATE OF FLORIDA) COUNTY OF OSCEDLA) SS Orange

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Lisa T. Daniel known to me and known to be the person(s) who executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 24 day of <u>May</u>. 1996.

(Notary Seal) Ollicial Seal JAMES NAYLOR Notary Public, State of Florida My comm. No CCS03495

Notary Public, State of Florida at Large My Commission Expires Oct, 19, 1997

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICI

OF

HEALING HANDS OF GOLD, INC.

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUFES 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.

The name of the corporation is: 1.

HEALING HANDS OF GOLD, INC.

The name and address of the registered agent and office is: 2.

NAME:

OFFICE ADDRESS:

Lisa T. Daniel President 4768 Walden Circ. (Apt. 325) Orlamndo, FL 32811

Having being named as registered agent and to accept service of process for the abovenamed 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

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314