

P96000051121

Bruce Common

Requestor's Name

1728 N 13th Ave

Address

Pensacola FL 32503

City/State/Zip

Phone #

200001861682

-06/14/96--01013--006

Office Use Only *****70.00 - 70.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

STATE
TALLAHASSEE FLORIDA

95 JUN 13 PM 3:09

711 1000

ARTICLES OF INCORPORATION

96 JUN 13 PM 3:09

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.

ARTICLE I NAME

The name of the corporation shall be:

A TURNING POINT MASSAGE THERAPY & HEALTH SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

6913 West Jackson Street, Pensacola, Florida 32506

ARTICLE III SHARES

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

5,000 shares @ \$1.00 Share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BRUCE F. COMMON, REGISTERED AGENT
1728 North 13th Avenue
Pensacola, Florida 32503

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

SUSAN OLIN, President 2,500 shares @ \$1.00 share.
Address: 6913 West Jackson Street, Pensacola, Florida 32506
Shares to be issued in exchange for value of experience in business management and massage therapy. No cash is offered.
Personal Liability: To the extent of the stock shares at \$1.00 share

BRUCE F. COMMON, Secretary/Treasurer 2,500 shares @ \$1.00 share
Address: 1728 North 13th Avenue, Pensacola, Florida 32509
Shares to be issued in exchange for value of experience in business management and massage therapy. No cash is offered.
Personal Liability: To the extent of the stock shares at \$1.00 share.

CORPORATE CHARTER: SEE ATTACHMENT

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

10 day of JUNE, 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: A TURNING POINT MASSAGE THERAPY AND
HEALTH SERVICES, INC.
2. The name and address of the registered agent and office is:

BRUCE F. COMMON

(NAME)

1728 North 13th Avenue

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Pensacola, Florida 32501

(CITY/STATE/ZIP)

FILED
96 JUN 13 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

6-10-96
(DATE)