P96000004568 TRANSMITTAL LETTER

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



over the second	ONAFRITA SPA 6	ADY INC.	
SUBJECT:	Proposed corpor	rate name - must include suf	lix)
			96 DEC 31
			S 23
Enclosed is an original a	and one(1) copy of the article	es of incorporation and a	
\$70.00	\$78.75	□\$122.50	□ \$131.25 ♀. Filing Fee,
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate	& Certified Copy	Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	A. ST. MARY		
	A. ST. MARY Name (Printe	ed or typed)	
	3280 - C S.A	ATLANTIC AVE.	
<i>x</i> ,	Addr	ATLANTIC AVE.	
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·	DAYTONA BEACITY, State	e & Zip	321/8 9 8 6
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<i></i>	(407) 33, Daytime Telep	2 <i>3 70 4</i>	
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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.

EFFECTIVE DATE

ARTICLE I NAME

The name of the corporation shall be:

LONGEVITY SPALADY, INC.

SECRETARY OF STATEMENTS
ON VISION FOR 31 PH 3: 08

ARTICLE II PRINCIPAL OFFICE

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

3280-C 5. ATLANTIC AVE. DAYTONA BEACH SHORES, FIR 32118

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $500 \ Shares$

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

A. ST. MARY
3280-C S. ATLANTIC AVE.
DAYTONA BEACH, FL 32118
SHOLES

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):

A ST. MARY
3280-C S. ATLANTIC AVE.

DAYTON A BEACH SHORES, FI 32118

ARTICLE VI

Effective Date OFTHIS CORP

Shall be 1-1-1997

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

31 day of <u>DECEMBER</u>, 19 96.

(An additional article must be added if an effective date is requested.)

Signature
Signature

Notarization is not required

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:	Longevity SPA LAPY, INC	
2.	The name and address of the regis	tered agent and office is:	<u> </u>
A		ST. MARY (NAME)	NECRETAR NVISION OF 96 DEC 3
		S. ATLANTIC AVE.	- P
	DAYTON	R BEACH SHORES, FLa. 32118 (CHY/STATE/ZIP)	STATENS H 3: 08

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) 12-31.96 (Date)

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