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

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SUBJECT:	1	ine	Out	for	M	355356	Inc.
		(Prop	osed corpo	rate name -	must i	nclude suffix	,

Enclosed for:	d is an original	and one (1) co	py of the articles of	incorporation and a check
[\$70.00	578.75	5 \$122.50	\$131.25
				800002208508C
				****122.50 ****122.50
	FROM:	Anne-/	Marie Sh	Irind
	_	Nam	e (printed or typed)	
		129	49 St.	·
			Address	•
		Houn	LES BE	ACH, FZ 34217
			City, State & Zip	· · · · · · · · · · · · · · · · · · ·
		(941)	778-8221	

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

Daytime Telephone number



ARTICLES OF INCORPORATION

OF

Time Our for Massage, Inc.

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:

Time Out for Massage, Inc.

ARTICLE II PRINCIPAL OFFICE

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

129 49 St. Holmes Beach, Fc 34217

ARTICLE III SHARES

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

500 SHARES @ 1 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: A_{nne} -Marie S_{hukina}

Holmes Beach, F234217

ARTICLE V INCORPORATORIS)

The name(s) and street address tion is(are):	s(es) of the incorpo	orator(s) to these Artic	cles of Incorpora-
Anne-Marie 5 129 49 St.	Dhurina		

Holmes Beach, FC 34217

○ † Ω	etor(s) has(have) executed t	hese Articles of Incorporation
June.	- Marie Shr	me
	Signature	
·	Signature Signature	

this

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF STATE OF DESIGNATION OF AHILIST SE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: Time OUE for Massage, Inc
2. The name and address of the registered agent and office is:
Anne-Mane Shurina (Name) 129 49 St. (P.O. Box not acceptable) Ho (mes Beach, Fc 34217 (City/State/Zip)
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.