P97000053342

THERAPEUTIC MASSAGE & AROMATHERAPY OILS 1826 South West Leafy Road Port Saint Lucie, Florida 34953 (561) 878-7734

June 16, 1997

Florida Department of State Division of Corporations Post Office Box 6327

Re: Happy Hands Massage & Oils, Inc.

100002215481--8 -06/18/97--01031--017 ****122.50 ****122.50

Enclosed is the original and one copy of the Articles of Incorporation, together with check number 654, in the amount of \$122.50 (one hundred and twenty two dollars and fifty cents).

This amount is to cover the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Sincerely

MargieAnne Barnes

Happy Hands Massage & Oils, Inc.

Marquellane Barnes

MAILING ADDRESS OF CORPORATION

1826 South West Leafy Road Port Saint Lucie, Florida 34953 (561) 878-7734 97 JUN 18 AN II: 09
SECRETARY OF STATE
TALLAHASSEE ET ORIDA

ne 6/18/97

ARTICLES OF INCORPORATION of

Happy Hands	Massage & Oils, Inc.	
	(name of corporation)	<u> </u>
The undersigned acting as the incorporators of the following articles of incorporation for such contains the following articles of	of a corporation under the Florida Business Corporrporation:	ration Act, adopt(s)
	TICLE I - CORPORATE NAME	¬., .,
The name of the corporation is:)7 SECI
Happy Hands	Massage & Oils Inc.	
	Massage & Oils, Inc.	FILE JUN 18 RETAKY O AHASSEE
	ARTICLE II - DURATION	
		D AH 11: 09 AF STATE FLORIDA
This corporation shall exist perpetually unless	ss dissolved according to Florida law.	OS TE OS
	ARTICLE III - PURPOSE	
m		ddab 1 Cab.
United States and the State of Florida.	e of engaging in any activities or business permitte	d under the laws of the
A	RTICLE IV - CAPITAL STOCK	
	shares of common stock, par value \$/_	oo per share.
The disposation is addictated to issue		por unado
ARTIC	LE V - INITIAL PRINCIPAL OFFICE	
The street address of the initial principal off		
STREET ADDRESS		
	Rd	
CITY Port St Lucie	FLORIDA	ZIP 34953
Mailing address, if different	PLORIDA	211 34433
STREET ADDRESS		
CITY	FLORIDA	ZIP
	IITIAL REGISTERED OFFICE AND AGENT	
	ed office and the name of the initial registered	agent at the office is
		agent at the office is.
Maraje wine Darne		
ADDRESS 1826 SW Leafy		
city Port St Lucie	FLORIDA	ZIP 34953

	ARTICLE VII - IN	ITIAL BOARD OF	DIRECTORS	
either increase	poration shall have + wo ed or diminished from time to time by the he initial director(s) of the corporation are	By-Laws, but shall n	ctors initially. The nu lever be less than one	mber of directors may be (1). The names and
NAME	Margieanne Barne	LS		
ADDRESS	1826 SW Leafy F	24		
CITY	Port St Lucie		Florida	ZIP 34953
NAME	Thomas J Barnes			
ADDRESS	1826 SW Leafy R	d		
CITY	Port St Lucie		Florida	ZIP 34953
NAME				
ADDRESS				
CITY		STATE	··	ZIP
The names ar	ARTICLE and addresses of the incorporators signing the	VIII - INCORPOR		ws:
NAME	Margieanne Barne	25		
ADDRESS	1826 SW Leafy R	با		10 to 1 7 1 10 1
CITY	Port St Lucie	STATE	Florida	ZIP 34953
NAME	Thomas J Barnes			
ADDRESS	1826 SW Leafy 1	22		
CITY	Part St Lucie	STATE	Florida	ZIP 34953
NAME				•
ADDRESS				
CITY		STATE	- · · · · · · · · · · · · · · · · · · ·	ZIP
The unders	igned incorporator(s) have executed the	ese Articles of Inco	orporation this	16th
day of	Jine	, 19 <u>97</u>		
		Morgul	lune Bain	(Signature)
			Bonne	(Signature)
				(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Happy Hands Massage & Oils, Inc.

(name of corporation)
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation
at 1826 SW Leafy Rd
1826 SW Leafy Rd Port St Lucie Florida 34953 has named Margieznne Barnes
has named Margieznne Barnes
ocated at the aforesaid address, as its registered agent to accept service of process within this state. SECRETARY OF STATE 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.
Marguellnne Barnes 6-16-97 (Signature) (Date)