100092087

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

Institute of Fitness and Massage (Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee **™**\$78.75

Filing Fee

& Certificate

□\$122.50

Filing Fee & Certified Copy \$131.25

Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Dondria Shown Thompson

72 Springdale Circle

LAKE WORTH FI 33461
City, State & Zip

5(01 - (052 - 2087 Daytime Telephone number

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

ne 10/27/97

FILED

ARTICLES OF INCORPORATION

97 OCT 24 PM 2: 13

The undersigned incorporator, for the purpose of forming a corporation under the Flanda RETART OF STATE Business Corporation Act, hereby adopts the following Articles of Incorporation. TALLAHASSEE, FLORIDA
ARTICLE I NAME The name of the corporation shall be: Institute of Fitness and Massage INC
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: The principal place of business and mailing address of this corporation shall be: The principal place of business and mailing address of this corporation shall be:
LAKE WORTH FI 33461
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Dondria Shaun Thompson The Springdale Liggle Lake Worth Fl 33461 ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:
Dondria Shaun Thompson
M2 Springdale Circle
Dondria SHaun Thompson The Springdale Circle LAKE WORTH FI 33461

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

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

Darding D. Thompson	9/18/97
Signature/Registered Agent	Date