Leven artifued Copy of articles LAW OFFICE OF

MARC S. STEINBERG 984 South Florida Avenue Rockledge, Florida 32955 (407) 632-4656

> In Cocoa Beach: (407) 631-1058

Also admitted in NJ

December 1, 1997

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

800002365358 ****122.50 ****122.50

Healing Hands Therapeutic Massage, Inc. Articles of Incorporation

Dear Sir or Madam:

Enclosed for filing please find the following:

- Articles of Incorporation;
- Certificate of Designation of Registered Agent/Registered Office; and
- Check in the amount of \$122.50, payable to the Florida Secretary of State, for the filing fees.

After _the documents have been filed, please forward your certificate to the undersigned.

Very truly yours,

Marc S. Steinberg

MSS:cks Enclosures

cc: Ms. Ann DeMaria (with enclosures)



ARTICLES OF INCORPORATION

OF

HEALING HANDS THERAPEUTIC MASSAGE, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation is: HEALING HANDS THERAPEUTIC MASSAGE, INC.

ARTICLE II EXISTENCE

This corporation shall have perpetual existence commencing on the filing of these Articles.

ARTICLE III TYPE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE IV SHARES

This corporation is authorized to issue 100 shares of \$1.00 par value common stock. The initial issue of the capital stock of the corporation shall be 100 shares for cash at a value of \$1.00 per share.

ARTICLE V PRINCIPAL OFFICE

The street address of the principal office of this corporation is: 256 Parnell Street, Merritt Island, Florida 32953.

ARTICLE VI FOR-PROFIT

This corporation is a For-Profit, Subchapter S Corporation.

ARTICLE VII REGISTERED AGENT

The name and street address of the initial registered agent are:

Ann DeMaria 256 Parnell Street Merritt Island, Florida 32953.

ARTICLE VIII DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1).

The name and address of the initial director of this corporation, who shall serve as director until the first annual meeting of shareholders, or until their successors shall have been elected and qualified, are as follows:

Ann DeMaria 256 Parnell Street Merritt Island, Florida 32953.

ARTICLE IX INCORPORATOR

The name and address of the person signing these Articles of Incorporation as the incorporator_are:

Ann DeMaria 256 Parnell Street Merritt Island, Florida 32953.

ARTICLE X POWERS OF SHAREHOLDERS

The shareholders shall have the power to adopt, amend, alter, change or repeal the Articles of Incorporation when proposed and approved at a shareholders' meeting, with not less than a unanimous vote of the common stock.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation at Rockledge, Florida, on this _____ day of December, 1997. _____ ____

ANN DeMARIA, Incorporator

STATE OF FLORIDA : COUNTY OF BREVARD :

The foregoing instrument was_acknowledged before me this _____ day of December, 1997, by ANN DeMARIA, who is () personally known to me or () who has produced ______ D560-04/-52-635-0 as identification.

Notary Public, State of Florida at Large

Print Name: ___

(Seal)





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: HEALING HANDS THERAPEUTIC MASSAGE, INC.
- 2. The name and address of the registered agent and office is:

Ann DeMaria 256 Parnell Street Merritt Island, Florida 32953.

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.

agent. Ann Dl Maria	- 121,197
ANN DeMARIA	Date

STATE OF FLORIDA : COUNTY OF BREVARD :

> Notary Public, State of Florida at Large Print Name:

Print Name: ______

My Commission Expires: ___
(Seal)

