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Transmittal letter

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

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-01/29/99-01026-004
*****87.50 *****87.50

SUBJECT: New Dimensions Massage Therapy, Inc.
(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 of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee
Certified Copy
& Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Patricia Kubicek
Name (Printed or Typed)
1417 NE 28th St
Address
Pompano Beach, FL 33064
City, State & Zip
(954) 786-0618
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JAN 29 PM 6:23

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

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ARTICLES OF INCORPORATION

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 shall be: New Dimensions Massage Therapy, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8921 W. Atlantic Blvd, Suite Q
Plaza at Coral Springs Two
Coral Springs, Florida 33071

ARTICLE III SHARES

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

1,000 Shares at a rate of Twenty Dollars (\$20.00) per Share
Held by Patricia Kubicek

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

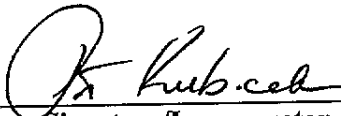
The name and Florida street address of the initial registered agent are:

Patricia Kubicek
8921 W. Atlantic Blvd, Suite Q
Plaza at Coral Springs Two
Coral Springs, Florida 33071

ARTICLE V INCORPORATOR

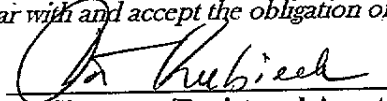
The name and address of the incorporator to these Articles of Incorporation are:

Patricia Kubicek
1417 NE 28th St
Pompano Beach, FL 33064


Signature/Incorporator

1/27/99
Date

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 obligation of my position as registered agent.


Signature/Registered Agent

1/27/99
Date

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