

Charter Number Only

3/15/99
P990000 25/86

VALUATION ONLY

Susana Orduna

Requestor's Name

5765 Sugar Crossing Dr

Address

Sugar Hill 6A 30518-2198

City

State

ZIP

Phone

A# 2741A.

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*****78.75 *****78.75

CORPORATION(S) NAME

TOUCH Therapy INC.

FILED
99 MAR 19 AM 9:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

☒ Profit
☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

Cert. Copy



Empire Toll Free: 1-800-432-3028

RECEIVED

99 MAR 19 AM 9:14
DIVISION OF CORPORATION

ARTICLES OF INCORPORATION
OF
TOUCH THERAPY INC

A Florida corporation for profit

Pursuant to the Florida General Corporation Act, the undersigned being the incorporator(s) with respect to these Articles of Incorporation, State of Florida:

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TALLAHASSEE FLORIDA

1. Name: TOUCH THERAPY INC
2. Commencement of corporate existence: in accordance with F.S. 607, 167, date of corporate existence of this corporation shall be the date of subscription and acknowledgement of these articles of incorporation provided these are filed by the Department of State within five (5) days, exclusive of legal holidays, after such date. Otherwise, the date of corporate existence shall be upon the filing of these articles of incorporation by the Department of State.
3. Duration: This corporation is to have perpetual existence.
4. Purpose: This corporation is organized for the purpose of transacting any or all-lawful business.
5. Capital Stock: The aggregate number of shares which this corporation shall have the authority to issue shall be one hundred (100) shares one dollar (\$1.00) par value common stock.
6. Principal Registered office and agent: The street address of the principal registered office of this corporation is : 10295 COLLINS AV, STE 524; BAL HARBOUR, FL 33154

The name of the initial registered agent at the address of the initial registered office is:
NAOMI PEREZ - 10295 COLLINS AV, STE 524; BAL HARBOUR, FL 33154
7. Initial board of directors: This corporation shall have no less than one director initially. The number of directors may be increased or diminished by the by-laws.

The name and address (es) of the initial director (s) of the corporation is (are)

Name

Address

NAOMI PEREZ - 10295 COLLINS AV, STE 524 ; BAL HARBOUR, FL 33154

8. Incorporator: The name and address of the person (s) signing these articles is:

Name

Address

NAOMI PEREZ - 10295 COLLINS AV, STE 524; BAL HARBOUR, FL 33154

9. Indemnification: The corporation shall indemnify any officer or director to the fullest extent permitted by law.
10. By-laws: The power to adopt, alter, amend or repeal by-laws shall be vested in the Shareholders and any by-law made by the shareholders shall not be altered, amended, or repealed by the board of directors.

11. Amendment: This corporation reserves the right to amend or repeal any provisions contained in these articles of incorporation, or any amendment hereto, and any conferred upon the shareholder is subject to this reservation.

12. Removal of Directors: The shareholder of this corporation shall not be entitled to remove any director from office during his term except for cause.

13. Powers: This corporation shall have all of the corporate power enumerated in the Florida General Corporation Act.

In witness hereof, the undersigned subscriber (s) have executed these Articles of Incorporation this 9 day of MARCH 1999

Y. Eynis 3/9/99
NOTARY PUBLIC

X
NAOMI PEREZ

State of Florida, County of Dade.

I hereby certify that on this 9 day of MARCH 1999 Before me a Notary Public, duly authorized to take acknowledgements, personally appeared

To me known to be the persons described as subscriber in, and who executed the foregoing Articles of Incorporation, and several acknowledged the Articles to be the free and voluntary act of them, each for himself and not for the other, and that the facts stated herein are truly set forth.

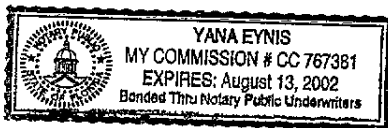
MY COMMISSION EXPIRES



Notary Public, State of Florida at large

Having been named registered agent for the above stated corporation, at the place designated in these articles, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties as such.

X
NAOMI PEREZ



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EXP 6-17-2000

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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