

P99000025622

TRANSMITTAL LETTER

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

EFFECTIVE DATE
3/10/99

000002806820--3
-03/15/99-01155-001
*****70.00 *****70.00

SUBJECT:

Massage for Healthy Living, 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:

Kim Van Winkle

Name (Printed or typed)

3691 Winkler Ave #821

Address

Ft. Myers FL 33916

City, State & Zip

941-936-1111

Daytime Telephone number

FILED
99 MAR 15 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

B. BROCK MAR 22 1999

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:

Massage for Healthy Living, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3691 Winkler Ave #821
Ft. Myers FL 33916

EFFECTIVE DATE
3-10-99

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Kim Van Winkle
3691 Winkler Ave #821
Ft. Myers FL 33916

ARTICLE V INCORPORATOR

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

Kim Van Winkle
3691 Winkler Ave #821
Ft. Myers, FL 33916

Article VI. Effective Date:

3-10-99

Kim Van Winkle

Signature/Incorporator

3-10-99

Date

Kim Van Winkle

(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

Kim Van Winkle

Signature/Registered Agent

3-10-99

Date

Kim Van Winkle

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA