

NR400009897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

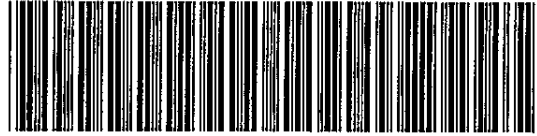
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900041634259

10/18/04--01012--022 **\$7.50

FILED
2004 OCT 18 A 9:51
SECRETARY OF STATE
TALLAHASSEE FLORIDA

10-20-04
WCC

TRANSMITTAL LETTER

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

SUBJECT: The NATURAL medicine Foundation, 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

ADDITIONAL COPY REQUIRED

FROM: CYNTHIA O'DONNELL
Name (Printed or typed)

3808 NORTH TAMiami TRAIL
Address

SARASOTA, FL 34234
City, State & Zip

941.355.9080
Daytime Telephone number

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

**ARTICLES OF INCORPORATION
OF
THE NATURAL MEDICINE FOUNDATION, INC.
A FLORIDA NOT-FOR-PROFIT CORPORATION**

We, the undersigned, with other persons being desirous of forming a not-for-profit corporation, under the provisions of Chapter 617 of the Florida Statutes, do agree to the following:

**ARTICLE I
CORPORATION'S NAME**

The name of the corporation shall be:

THE NATURAL MEDICINE FOUNDATION, INC.

**ARTICLE II
PRINCIPLE OFFICE**

The address of the principal office of this corporation shall be

3808 NORTH TAMiami TRAIL
SARASOTA, FLORIDA
34234

and the mailing address of the corporation shall be the same.

**ARTICLE III
PURPOSE**

Said corporation is organized exclusively for charitable, religious, educational, literary and scientific purposes within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue Code. Notwithstanding any other provision of these articles, this corporation will not carry on any other activities not permitted to be carried on by an organization exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue Law.

In the event of dissolution, the residual assets of the organization will be turned over to one or more organizations which themselves are exempt as organizations described in sections 501 (c)(3) and 170(c)(2) of the Internal Revenue Code of 1986 or the corresponding sections of any prior or future Internal Revenue Code, or to the Federal, State or local government for exclusive public purpose.

**ARTICLE IV
MANNER OF ELECTION**

The manner in which the directors are to be elected or appointed is as stated in the bylaws.

**ARTICLE V
INITIAL DIRECTORS AND/OR OFFICERS**

FILED
2004 OCT 18 A 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The initial Board of Directors of the Corporation shall be appointed by the Incorporator at the organizational meeting of the Corporation.

**ARTICLE VI
INCORPORATOR**

The name and address of the Incorporator of these Articles is:

CYNTHIA O' DONNELL
3808 NORTH TAMIAMI TRAIL
SARASOTA, FLORIDA
34234

**ARTICLE VII
TERM OF CORPORATE EXISTANCE**

This corporation is to exist perpetually.

**ARTICLE VIII
INITIAL REGISTERED AGENT AND STREET ADDRESS**

The street address of the initial registered office of the Corporation shall be 3808 NORTH TAMIAMI TRAIL, SARASOTA, FLORIDA, 34234 and the name of the initial registered agent of the corporation at that address is CYNTHIA O'DONNELL at THE NATURAL MEDICINE FOUNDATION, INC.

In Witness Whereof, the undersigned has hereunto set their hand and seal on this 14TH day of October, 2004.

Cynthia O'Donnell
Incorporator

**ACCEPTANCE OF REGISTERED AGENT
DESIGNATED IN THE ARTICLES OF INCORPORATION**

CYNTHIA O'DONNELL, an individual residing in this State, having a business office identical with the registered agent office address of the corporation named below, and having been designated as the Registered Agent in the above and foregoing Articles of Incorporation of; THE NATURAL MEDICINE FOUNDATION, INC. is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

By: Cynthia O'Donnell

By: Ø

STATE OF FLORIDA
COUNTY OF SARASOTA

*NOT
NOTARIZED*

The foregoing instrument was acknowledged before me this _____ day of October, 2004, by CYNTHIA O'DONNELL, individually, who is personally known to me or who has produced a _____ as identification.