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(F	Requestor's Name)			
· (A	Address)			
(A	Address)			
(0	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(E	Business Entity Name)			
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(C	Pocument Number)			
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
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	Office Use Only			
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Effective Date May 5,2010

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SECONDIANT OF STATE

BOWN 18 Williams

COVER LETTER

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

SUBJECT: Prescr	iption vveignt Loss 2, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an ori	ginal and one (1) copy of the art	icles 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 CO	PY REQUIRED
FROM: BI	randace Tyra Nam	e (Printed or typed)	
37	43 Boardwalk Ct.		
<u> </u>		Address	
<u>G</u> u	ulf Breeze, FL 32563	, State & Zip	
85	0-932-2394		
	Daytime ?	Telephone number	
No			
	E-mail address: (to be use	ed for future annual report	notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

Article I Name

The name of the corporation shall be: Prescription Weight Loss 2, Inc.

Article II Principal Office

The principal place of business/mailing address is: 3743 Boardwalk Ct.
Gulf Breeze, FL 32563

Effective Date May 5, 2016

Article III Purpose

The purpose for which the corporation is organized is: Any legal business purpose.

Article IV Shares

1,000 Shares authorized

Article V Initial Officers and/or Directors

Brandace Tyra - President 3743 Boardwalk Ct. Gulf Breeze, FL 32563

Article VI Registered Agent

Brandace Tyra 3743 Boardwalk Ct. Gulf Breeze, FL 32563

Article VII Incorporator

Brandace Tyra 3743 Boardwalk Ct. Gulf Breeze, FL 32563

Article VIII Date Incorporation to be Effective

May 5, 2010

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature Registered Agent

Signature/Incorporator

Date

Date