P10000085271

(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

200186652062

10/18/10--01019--006 **87.50

FILED
10 OCT 18 PM 3:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRD 10/19

COVER LETTER

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

SUBJECT: HealthWise Enterprises, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are 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: Silvia Rosen Halpern
Name (Printed or typed)

2594 SW Mayacoo Way
Address

Palm City, Florida, 34990
City, State & Zip

772 285 0699
Daytime Telephone number

silviahalperndc@gmail.com
E-mail address: (to be used for future annual report notification)

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

FILED
10 OCT 18 PM 3:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Articles of Incorporation

(pursuant to Chapter 621, Florida Statutes)

Article I: Name

The name of the corporation shall be: HealthWise Enterprises, Inc.

Article II: Principal Office/Mailing Address

The principle street address and mailing address of the corporation shall be:

Street Address:
2594 SW Mayacoo Way
Palm City, FL 34990

Mailing Address:
(same)

Article III: Purpose

The purpose for which the corporation is organized is:

To conduct any and all lawful business.

Article IV: Shares

The Corporation shall be authorized to issue capital stock in the following manner:

One hundred (100) Shares of Common Stock, having no par value.

Article V: Initial Officers and/or Directors

Director
Silvia Rosen Halpern
2594 SW Mayacoo Way
Palm City, FL 34990

FILED
10 OCT 18 PM 3:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Article VI: Registered Agent

The name and Florida street address of the registered agent is:

Silvia Rosen Halpern
2594 SW Mayacoo Way
Palm City, FL 34990

Article VII: Incorporator

Silvia Rosen Halpern
2594 SW Mayacoo Way
Palm City, FL 34990

Having been named as registered agent and to accept service of process for the above-stated corporation at the place designated herein, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with all the provisions of the applicable Florida and federal 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.

Registered Agent Signature: _____

Date: 10/10/10

Incorporator Signature: _____

Date: 10/10/10