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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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11 JUL 12 PM 3:01

COVER LETTER

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

SUBJECT: ROYAL WELLNESS, CORP.
(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: SANDRA M. MARRERO
Name (Printed or typed)

20533 BISCAYNE BLVD., STE 123
Address

AVENTURA, FL. 33180
City, State & Zip

786-227-9780
Daytime Telephone number

zandimar@gmail.com
E-mail address: (to be used 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: ROYAL WELLNESS, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address
20533 BISCAYNE BLVD.
STE 123
AVENTURA, FL. 33180

Mailing address, if different is:
P.O. BOX 170763
HIALEAH, FL. 33017

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SANDRA M. MARRERO DIRECTOR
Address: 20533 BISCAYNE BLVD.
STE 123
AVENTURA, FL. 33180

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT
The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:
Name: SANDRA M. MARRERO
Address: 20533 BISCAYNE BLVD, STE 123
AVENTURA, FL. 33180

ARTICLE VII INCORPORATOR
The **name and address** of the Incorporator is:
Name: SANDRA M. MARRERO
Address: 20533 BISCAYNE BLVD, STE 123
AVENTURA, FL. 33180

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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

Sandra M. Marrero
Required Signature/Registered Agent

07/07/2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sandra M. Marrero
Required Signature/Incorporator

07/07/2011
Date