

SUBJECT: American Nutriceuz (Name of corporation	icals, Inc.	
(Name of corporation	on - must include suffix)	:
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida.	Authorization to Transact I register the above reference	Business in Florida", d foreign corporation to
Please return all correspondence concerning this matter	to the following:	······································
Floyd H. Kruger	SUUL F Person)	)031503395 -02/28/0001153002 *****70.00 *****70.00
American Nutrice (Firm/Co	uticals, Inc.	<u>.</u>
205 N. Orange Ave	e, Suite IN	
Sarasota, FL 34	236	
(City/Sta	te/Zip)	1 0-1
Should you need to call someone concerning this matte	r, please call:	
Floyd Kruger at (944 (Name of Person) (Area	365-1922	
(Name of Person) (Area	Code & Daytime Telephon	DO MAR 28 ON MAR 28 CRETAR LLAHASS
STREET ADDRESS:	MAILING ADDRESS:	B PP
Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	4 2: 25 FLORIDA
Enclosed is a check for the following amount:		(
\$70.00 Filing Fee \$\Bigcirc \text{\$78.75 Filing Fee & \$\Bigcirc}\$ Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Katherine Harris Secretary of State

March 7, 2000

FLOYD H. KRUGER AMERICAN NUTRICEUTICALS INC. 205 N ORANGE AVE SUITE 1N SARASOTA, FL 34236

SUBJECT: AMERICAN NUTRICEUTICALS INC.

Ref. Number: W00000006087

We have received your document for AMERICAN NUTRICEUTICALS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A page is missing from the application. Enclosed is the page for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan Document Specialist

Letter Number: 400A00012596

DO MAR 28 PM 2: 25 SECRETARY OF STATE

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) 2. De aware

(State or country under the law of which it is incorporated)

4. June 18, 1999

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual")

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")

(SEE SECTIONS 607 1501 607 1502 and 817 155 E.S.) 2. Delaware
(State or country under the law of which it is incorporated) SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. a. 205 N. Orange Ave., Suite IN, Sarasota, FL 34236
(Principal office address)
b. 205 N. Orange Ave., Suite IN, Sarasota, FL 34236
(Current mailing address) 8. Manufacture and market herbal supplements
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) 98 HVC, 241—
, Florida 34236
(Zip code) 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative 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's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law

of which it is incorporated.

2. Names and business addresses of officers and/of directors.	
A. DIRECTORS	
hairman:	
ddress:	
ca Chairman	
ce Chairman:	
ldress:	
1/1/1 6 6 11	
rector: W///am J, Goury	
Idress: 205 N. Orange AVC., Suite 2N	
rector: William 5, Coury  Idress: 205 N. Orange AVC., Suite 2N  Sarasota, FL 34236	_ ·,,
rector:	
ldress:	
OFFICERS	<del></del>
esident:	——————————————————————————————————————
dress:	
ce President:	
dress:	
	ASS
cretary:	Fig P D
dress:	OR 22
	——————————————————————————————————————
easurer:	
dress:	
OTE: If necessary, you may attach an addendum to the application listing addit	tional officers and/or directors.
1.1 10 00	
(Signature of Chairman, Vice Chairman, or any officer listed in n	umber 12 of the application)
William S. Cours Director	'

(Typed or printed name and capacity of person signing application)

## State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "AMERICAN NUTRICEUTICALS INC." IS
DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS
IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS
THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF
FEBRUARY, A.D. 2000.

Edward J. Freel, Secretary of State

0276509

AUTHENTICATION:

02-24-00

3057840 8300

DATE:

001092003