CORPORATE ACCESS, INC. P.o.	ox 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666
	PICK UP 4/25/02 CUS
CERTIFIED COPY	FILING FORE TO
L.) (CORPORATE NAME & DOCUMENT #)	5000053472150 -04/25/0201020016
(CORPORATE NAME & DOCUMENT #)	-04/25/0201020016 *****70.00 ******70.00
(CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #)	
(CORPORATE NAME & DOCUMENT #)	1 0 3 g
SPECIAL INSTRUCTIONS	
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANC. REGISTER A FO	E WITH SECTION 607 REIGN CORPORATIO	.1503, FLORIDA S. N TO TRANSACT I	TATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDA
City Corporati	on		
words or abbrev	ration; must include the wriations of like import in lar partnership if not so con	inguage as will clearly	ED", "COMPANY", "CORPORATION" or indicate that it is a corporation instead of a present.) 62-1325134 (FEI number, if applicable)
2. Tennessee			62-1325134
(State or country	under the law of which it	is incorporated)	(FEI number, if applicable)
4. August 17, 198	87	5.	Perpetual
(Dat	e of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualifica	ation		
(Date first transa	ected business in Florida. (SEE	If corporation has not SECTIONS 607.1501	transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)
7100 Vine Stre	et, Suite 1400, Murfree	sboro, TN 37130	
		(Principal office add	ress)
P. O. Box 139	8, Murfreesboro, TN 3		
		(Current mailing add	iress)
8. General Partr	ner of a nutritional servi	ces company	puntry to be carried out in state of Florida)
` •	-		
9. Name and st	reet address of Florid:	a registered agent:	(P.O. Box or Mail Drop Box NOT acceptable)
Name:	NRAI Services, Inc.		
0.00	526 E. Bark Avenue		
Office Address:	526 E. Park Avenue		
	Tallahassee		,Florida <u>32301</u>
	(City)		(Zip code)
Having been na designated in th further agree to duties, and I am	is application, I hereby comply with the provis	accept the appoing accept the appoing accept the appoing a section is a considerate and accept the appoint a considerate a considerate appoint a considerate a consi	vice of process for the above stated corporation at the place tment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my of my position as registered agent.
	By:	(SEE ATTACHED	
,		(Registered agent's	signature)
Having been na designated in th further agree to duties, and I am	(City) agent's acceptance: med as registered agen is application, I hereby comply with the provis a familiar with and acceptal	c accept the appoint sions of all statutes ept the obligations (SEE ATTACHED (Registered agent's	(Zip code) vice of process for the above stated corporation at the timent as registered agent and agree to act in this capa relative to the proper and complete performance of most my position as registered agent.

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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: W. Andrew Adams Address: 100 Vine Street, Suite 1400, Murfreesboro, TN 37130 Vice Chairman: Robert G. Adams Address: 100 Vine Street, Suite 1400, Murfreesboro, TN 37130 Director: Richard F. LaRoche, Jr. Address: 100 Vine Street, Suite 1400, Murfreesboro, TN 37130 B. OFFICERS President: _W. Andrew Adams Address: 100 Vine Street, Suite 1400, Murfreesboro, TN 37130 Vice President: Robert G. Adams Address: 100 Vine Street, Suite 1400, Murfreesboro, TN 37130 Secretary: Richard F. LaRoche, Jr. Address: 100 Vine Street, Suite 1400, Murfreesboro, TN 37130 Treasurer: Robert G. Adams Address: same as above NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Richard F. LaRoche, Jr., Director and Secretary

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

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

CITY CORPORATION

2. The name and address of the registered agent and office is:

NRAI Services, Inc.

(NAME)

526 E. Park Avenue

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Tallahassee, FL 32301

(CITY/STATE/LP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 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.

NRAI Services, Inc.	4/24/02	
Wallet Coople	4/24/02	
(SIGNATURE)	(DATE)	
Charles A. Covle - Assistant Secretary		

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

Secretary of State **Division of Business Services** 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 04/24/2002 REQUEST NUMBER: 02114135 TRIEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 08/17/1987 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0192899 JURISDICTION: TENNESSEE

HAKWELL HOWARD HYNE GABBERT & MANNER DEANNA PERRY 315 DEADERICK ST NASHVILLE, TN 37238

REQUESTED BY: HARWELL HOWARD HYNE GABBERT & MANNER DEANNA PERRY 315 DEADERICK ST NASHVILLE, TN 37238

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"CITY CORPORATION"

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE DECIDING AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED WITH THIS OFFICE; AND
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

IROM: HARWELL HOWARD HYNE GABBERT & MANNER 315 DEADERICK STREET 1800 IST AMER CENTER NASHVILLE, TN 37238-1800

ON DATE: 04/24/02

RECEIVED:

\$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00003071181 ACCOUNT NUMBER: 00000511



FROM:

RILEY C. DARNELL SECRETARY OF STATE