706000004788

(Re	questor's Name)			
· (Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
." PICK-UP	☐ WAIT	MAIL		
, (Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



600076222306

06/16/06--01029--004 **78.75

SECRETARY OF STATE DIVISION OF CORPORATION:

W06-21109



DIVISION OF CORPORATION:

June 19, 2006

PEDRO PRADO 519 CLEVELAND ST #101 CLEARWATER, FL 33755

SUBJECT: SYSTEMIC NUTRITIONAL CENTERS, INC.

Ref. Number: W06000027709

We have received your document for SYSTEMIC NUTRITIONAL CENTERS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

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) 245-6972.

Doris Brown Document Specialist

Letter Number: 106A00041084

COVER LETTER

OF JUL 18 PM 3: 30

TO: New Filing Section	74 3: 30			
Division of Corporations				
SUBJECT: Systemic Nutri (Name of corpo	tional Centers Inc.			
(Name of corpo	ration - must include suffix)			
Dear Sir or Madam:				
	for Authorization to Transact Business in Florida," I to register the above referenced foreign corporation to			
Please return all correspondence concerning this m	atter to the following:			
Podro Pondo				
(Nan	ne of Person)			
Systemic Nu	atter to the following: me of Person) drittonal Center, Inc. m/Company) reland St #101 Address) er, F2 33755			
(Firm	n/Company)			
	reland St #101			
(4	Address)			
ClearraL	er. F2 33755			
(City/S	tate and Zip code)			
For further information concerning this matter, plea	ase call:			
Lia Coppoli at (72	27) 446-1126			
(Name of Person) at (727) 446-1126 (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
New Filing Section New Filing Section				
Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314			
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$\sqrt{\sq}}}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}} \end{\sqrt{\sqrt{\sintexign{\sq}}}}}}}}} \end{\sqrt{\sqrt{\sq}}}}}}} \sqrt{	\$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy			

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE	WITH SECTION 607.1503,	FLORIDA STATU	UTES, THE FOLLOWING IS	SUBMITTED TO
register a for 1. Svol	emic. Nuvition	ransaci busi nglah	NESS IN THE STATE OF FL	ORIDA.
(Enter name of co	orporation; must include "INCO orp," "Inc," "Co," or "Corp.")	RPORATED," "C	UTES, THE FOLLOWING IS NESS IN THE STATE OF FL CC , INC. OMPANY," "CORPORATION	0 8 8 3 30 0 3 3
(If name unavaila	ble in Florida, enter alternate co	orporate name adop	ted for the purpose of transacting	g business in Florida)
2. <u>Del</u>	aware, us A	3	75- 321 2800 (FEI number, if appl	
4. <u>3</u>	-29 - 2006	5	ration: Year corp. will cease to	
				exist or "perpetual")
6	(Date first transac	Th Q	ride if prior to registration)	
	(SEE SECTIONS 607.	1501 & 607.1502, F	F.S., to determine penalty liabilit	у)
7. <u>519</u>	Cleveland St (Princi	pal office address)	Clearwake, f	2 33755
		Be		
	(Curre	nt mailing address)		
8. <u>>ale</u> (Purpose(s)	s of nutrition of of corporation authorized in he	Supplements	v to be carried out in state of Flo	rida)
	t address of Florida registered			· ····· /
Name:	Pedro Prado			•
Office Address:	288 Bellvier Clearvale	o Rd	-	
	Clearyvale		Florida 33756	
	(City)		(Zip code)	
designated in this further agree to co	ed as registered agent and to application, I hereby accept omply with the provisions of with and accept the obligation.	the appointment all statutes relativ ons of my position	process for the above stated as registered agent and agree to the proper and complete as registered agent.	e to act in this capacity. I
	(Régistered ager	nt'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.

12. Names and business addresses of officers and/or directors:A. DIRECTORS		DIVISION OF CORPORATION		
	288 Bellview Kd			
	Clearwater Fr 33756			
Vice Chairma	an:			
Address:	·			
Director:	Pedro Prado			
Address:	288 Bellvicus Rd			
	Clewingter, FL 33756			
Director:	Fabiola Perez			
Address:	218 Bellview Rd			
	Clearwater FL 33756			
B. OFFICE	ERS			
President:	Jose Olaide			
Address:	9M92			
	nt:			
Secretary:	Pedro Prado			
Address:	same			
Treasurer:	fabiola Verez			
Address:	Same			
NOTE: If	necessary, you may attach an addendum to the application listing additional of	ficers and/or directors.		
13.	(Signature of Director of Officer listed in number 12 of the applicat	•		
	•	ion)		
14	(Typed or printed name and capacity of person signing application	n)		

Delaware | Delaware | DIVISION OF CORPORATION: 06 JUL 18 PM 3: 31

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SYSTEMIC NUTRITIONAL CENTERS, 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 NINETEENTH DAY OF JULY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SYSTEMIC NUTRITIONAL CENTERS, INC." WAS INCORPORATED ON THE TWENTY-NINTH DAY OF MARCH, A.D. 2006.

4133036 8300 060680588



Harriet Smith Windsor, Sacretary of State
AUTHENTICATION: 4910278

DATE: 07-19-06