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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

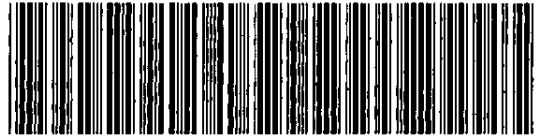
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10 FEB - 1 PM 1:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

026 VHI

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Wellness, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Gary Fine

Name of Person

Wellness, Inc.

Firm/Company

4205 Westbrook Drive

Address

Aurora, Illinois 60504-7133

City/State and Zip code

gmfine1@sbcglobal.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Fine

Name of Person

at (630) 849-2322

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|---|--|---|--|



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 8, 2010

GARY FINE
4205 WESTBROOK DRIVE
AURORA, IL 60504-7133

SUBJECT: WELLNESS, INC. OF ILLINOIS
Ref. Number: W10000000926

We have received your document for WELLNESS, INC. OF ILLINOIS and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the corrected original and one copy of 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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 210A00000645

**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.*

1. Wellness, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- Wellness, Inc. of Illinois
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Illinois 3. 36-3437660
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 4, 1986 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 01/01/2009
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 4205 Westbrook Drive, Aurora, IL 60504
(Principal office address)
- 4205 Westbrook Drive, Aurora, IL 60504
(Current mailing address)
8. Preventive Screening Services
(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 NOT acceptable)
- Name: InCorp Services, Inc.
- Office Address: 1788 67th Court North
Loxahatchee, Florida 33470
(City) (Zip code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

Lisa Analia on behalf of InCorp Services, Inc.
(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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Cheryl A. Fine

Address: 4205 Westbrook Drive

Aurora, IL 60504

Director: Gary M. Fine

Address: 4205 Westbrook Drive

Aurora, IL 60504

B. OFFICERS

President: Cheryl A. Fine

Address: 4205 Westbrook Drive

Aurora, IL 60504

Vice President: Cheryl A. Fine

Address: 4205 Westbrook Drive

Aurora, Illinois 60504

Secretary: Cheryl A. Fine

Address: 4205 Westbrook Drive, Aurora, IL 60504

Treasurer: Gary M. Fine

Address: 4205 Westbrook Drive, Aurora, IL 60504

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. X Cheryl A. Fine Gary M. Fine
(Signature of Director or Officer listed in number 12 of the application)

14. Gary M. Fine

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

File Number 5416-084-4

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AND
FILED

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To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

WELLNESS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 04, 1986, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



Authentication #: 0932701296

Authenticate at: <http://www.cyberdriveillinois.com>

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 23TH day of NOVEMBER A.D. 2009 .

Jesse White

SECRETARY OF STATE