F9500004079

| TO: Qualification/Tax Lien Section Division of Corporations | 1.000011566061 -08/24/9501011017 *****78.75 *****78.75 |
|--|--|
| SUBJECT: Nutri Juice, Inc. (Name of corporation - must include suffix) | |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation for Authorization to Tra Florida", "Certificate of Existence", and check are submitted to register the foreign corporation to transact business in Florida. | nsact Business in above referenced |
| Please return all correspondence concerning this matter to the following: | |
| Rhonda M. Walsh (Name of Person) | AUG 23 |
| Nutri Tuice INC. (Firm/Company) | SFLORIDA CF STATE COF STATE |
| 2744 Buckborn Oaks Dr. | - untr |
| Valrico FL 3:3594 | |
| Should you need to call someone concerning this matter, please call: | |
| | (o(c1-9412 me Telephone Number) |

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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. Nutri Juice INC. | | | |
|---|---|---------------------|----------|
| (Name of corporation: must include the word "INCORPORATED" "COMPANY", "CORPORATED" abbreviations of like import in language as will clearly indicate that it is a corporation instead of person or partnership if not so contained in the name at present.) | ATION" or some | words | or |
| 2. De la water (State or country under the law of which it is incorporated) 3. 59-37 (FEI number, | 3295 Trapplicable) | 7 [| |
| 4. 19 tan 1995 (Date of Incorporation) 5. Representation: Year corp. will cease | +ucl | erpetu | nl*) |
| 6. (Date first transacted business in Florida, (SEE SECTIONS 607.1501, 607.1502, AND 817.15 | 3, F.S.) | <u>.</u> | |
| 7. 2744 Buckhorn Caks Dr. | (1) 5 to | ري. | |
| Valcico FL 33594 (Current mailing address) | LAHA | 5 2013 | 17.3.420 |
| 8. Hearth Juice Bar (Purpose(s) of corporation authorized in home state or country to be carried out in the state of | RY OF S | <u> </u> | [5]51] |
| rionary | 통 | | 1057/8 |
| Name and street address of Florida registered agent: (P.O. Box or Mail D acceptable) | rop Box N | <u>OT</u> | |
| Name: Rhonda M. Walsh | | | |
| Office Address: <u>2744 Buck horn Caks</u> Dr | | | |
| 10. Registered agent's acceptance: , Florida, 3359 (Zip Code) | <u>4</u> | | |
| Having been named as registered agent and to accept service of process for the a corporation at the place designated in this application, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with all statutes relative to the proper and complete performance of my duties, and I am and accept the obligations of my position as registered agent. | bove stated ntment as the provisi m familiar | i ons oj with | f |

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.

(Registered agent's signature)

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Address: _ Vice Chairman: Address: Director: Address: Director: ____ Address: _____ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: ____ Address: ____ Vice President: ___ Address: ____ Secretary: __ Address: ____ Treasurer: ____ Address: ____ 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) Rhonda M. Walsh
(Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NUTRI JUICE, 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 SEVENTEENTH DAY OF AUGUST, A.D. 1995.

95 AUS 23 AH II: 47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE: 7611717

08-17-95

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