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2006 JUN -1 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JUN " 2 2006

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Health Workshops R Us, Corp.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Stephanie M. Pollard
Name (Printed or typed)

7006 SW 21st Lane
Address

Gainesville, FL 32607
City, State & Zip

352-256-5823
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Health Workshops R US, Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7006 SW 21st Lane
Gainesville, FL 32607

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Health Education Services

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Appointed

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Stephanie Pollard, Health Educator Director
7006 SW 21st Lane
Gainesville, FL 32607

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Stephanie Pollard
7006 SW 21st Lane Gainesville, FL 32607

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stephanie Pollard
7006 SW 21st Lane Gainesville, FL 32607

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

Date

5-30-06

Signature/Incorporator

Date

5-30-06

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2006 JUN - 1 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA