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TRANSMITTAL LETTER

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

FILED
00 MAY 24 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: SERVILIFE INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600003265186-5
-05/24/00--01056--009
*****78.75 *****78.75

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 of
Status

ADDITIONAL COPY REQUIRED

FROM: DARIO LONDONO
Name (Printed or typed)

6429 COWDEN RD (U-201)
Address

MIAMI LAKES FL. 33014
City, State & Zip

(305) 557-3135
Daytime Telephone number

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

F. CHEN

JUN 2 2000

✓ **ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

SERVILIFE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

5901 N.W. 151 ST (SUITE 221)

MIAMI LAKES FL. 33014

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

VITAMINS DISTRIBUTOR

ARTICLE IV SHARES

The number of shares of stock is:

10 SHARES OF \$10 EACH

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

DARIO LONDONO (PRESIDENT) 6429 COWPEN RD (U-201) MIAMI LAKES FL. 33014

ALBERTO LONDONO (VICE-PRESIDENT) 6429 COWPEN RD (U-201) MIAMI LAKES FL. 33014

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

DARIO LONDONO
6429 COWPEN RD (U-201)
MIAMI LAKES FL. 33014

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DARIO LONDONO
6429 COWPEN RD (U-201)
MIAMI LAKES FL. 33014

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

5/17/00

Date



Signature/Incorporator

5/17/00

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 MAY 24 AM 9:10

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