

FILED

00 SEP 25 AM 9: 13

SEGRETARY OF STATE TALLAHASSEE, FLORIDA

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

500 <u>0023402</u>	7255 1104006
*****87.50	

SUBJECT: Health And Wellness Solutions Of Central Florida Corp. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:		inted or typed)	
1028 Indian Oaks Dr. West, Holly Hill, Address			
	F1,32117 City,	State & Zip	<del></del>
	904-257-9181	elenhone number	<del></del>

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

PH 9/28/00

# **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:

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Health And Wellness Solutions Of Central Florida Corp. 00 SEP 25 AM 9: 13

# ARTICLE II PRINCIPAL OFFICE

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The principal place of business/mailing address is:

1028 Indian Oaks Dr. West, Holly Hill, Fl 32117

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To make a profit through the sale and distribution of vitamin type products.

## ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

President-Sabrina Lilly 1028 Indian Oaks Dr. West, Holly Hill, Fl 32117

#### ARTICLE VI REGISTERED AGENT

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

John Lilly, 1028 Indian Oaks Dr. West, Holly Hill, Fl 32117

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Steven Paul Mullins, 979 Parkwood Dr., Ormond Beach, Fl 32174

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

Silver 10 Cent /1

Data