

P000000094742



ACCOUNT NO. : 072100000032

REFERENCE : 856230 154297A

AUTHORIZATION :

COST LIMIT : \$ 78.75

Patricia Piguit

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT -6 PM 4:31

ORDER DATE : October 6, 2000

ORDER TIME : 1:49 PM

ORDER NO. : 856230-005

CUSTOMER NO: 154297A

CUSTOMER: Mark .. Miller, Esq
Ford & Miller, P.A.
Suite 320
6 East Bay Street
Jacksonville, FL 32202

500003417425--5

DOMESTIC FILING

NAME: HOLISTIC HEALTH OPTIONS, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS:

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32304

RECEIVED
00 OCT -6 PM 2:26

g 10/6/00

**ARTICLES OF INCORPORATION
OF
HOLISTIC HEALTH OPTIONS, INC.**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT -6 PM 4:31

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I - NAME

The name of this Corporation is HOLISTIC HEALTH OPTIONS, INC.

ARTICLE II - PRINCIPAL OFFICE

The street address of the initial principal place of business and mailing address of this Corporation is 4070 Herschel Street, Apt. # 4, Jacksonville, Florida 32210.

ARTICLE III - CAPITAL STOCK

The number of shares of stock that this Corporation is authorized to have outstanding at any one time is one thousand (1,000) shares of common stock.

ARTICLE IV - INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Mark R. Miller at 6 East Bay Street, Suite 550, Jacksonville, Florida 32202.

ARTICLE V - INDEMNIFICATION

Directors, officers, employees and agents of this Corporation shall be indemnified to the fullest extent permitted by Florida law.

ARTICLE VI - INCORPORATOR

The name and street address of the incorporator is Mark R. Miller, 6 East Bay Street, Suite 550, Jacksonville, Florida 32202.

ARTICLE VII - BYLAWS

The Board of Directors shall adopt Bylaws for this Corporation and may from time to time modify, alter, amend or rescind the same by majority vote of the members of the Board of Directors present at any regular or special meeting or by written consent of all of the members of the Board of Directors

ARTICLE VIII - AMENDMENTS

This Corporation may amend, alter or repeal any provision of these Articles of Incorporation in the manner now or hereinafter provided by Florida law.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 4 day of October, 2000.



MARK R. MILLER

DATE: 10/08/00

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT -6 PM 4: 31

Pursuant to the provisions of 607.0501, Florida Statutes, HOLISTIC HEALTH OPTIONS, INC., organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is HOLISTIC HEALTH OPTIONS, INC.
2. The name and address of the registered agent and office is Mark R. Miller, 6 East Bay Street, Suite 550, Jacksonville, Florida 32202.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, MARK R. MILLER HEREBY ACCEPTS THE APPOINTMENT AS REGISTERED AGENT AND AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF ITS DUTIES, AND IS FAMILIAR WITH AND ACCEPTS THE OBLIGATIONS OF ITS POSITION AS REGISTERED AGENT.

By: 
MARK R. MILLER

Date: 10/05/00