

TRANSMITTAL LETTER

P010000006316

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

SUBJECT:

CARDIO CARE, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

APPROVED
AND
FILED
01 JAN 17 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

EARL DEAN OSBOURN JR

Name (Printed or typed)

800 LAUREL OAK DRIVE

Address

NAPLES, FL 34108

City, State & Zip

Daytime Telephone number

400003552654-6

-01/17/01--01110--001

*****87.50 *****87.50

RECEIVED
01 JAN 17 PM 2:41
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

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1-17-01
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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:

CARDIOCARE, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

800 LAUREL OAK DRIVE
SUITE 200
NAPLES, FL 34108

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HEALTH SUPPLEMENTS

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

EARL DEAN OSBOURN JR - PRESIDENT & SOLE DIRECTOR
800 LAUREL OAK DRIVE
NAPLES, FL 34108

ARTICLE VI REGISTERED AGENT

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

EARL DEAN OSBOURN JR
800 LAUREL OAK DRIVE
NAPLES, FL 34108

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EARL DEAN OSBOURN JR
800 LAUREL OAK DRIVE
NAPLES, FL 34108

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

01-17-01

Signature/Incorporator

Date

01-17-01

APPROVED
AND
FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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