

P010000006390

September 16, 1999

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

FILED
01 JAN 17 PM 4:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: NEW CORPORATION REQUEST:

ONWORD **MIRACLE HEALTH PRODUCTS, Inc.**

SECOND CHOICE ~~MIRACULOUS PRODUCTS, INC.~~

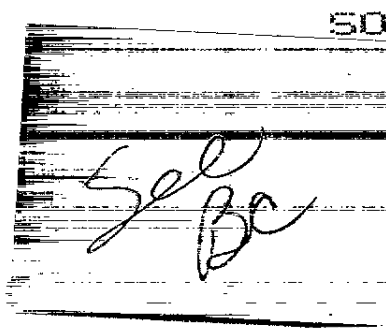
Enclose is an original and two copies of the Articles of Incorporation for the above corporation and a check in the amount of \$35.00 (filing fees), \$52.50 (certified file stamped copy) and \$35.00 miscellaneous fees. Attached is a check payable to Florida Division of Corporations for the total amount of \$122.50.

Please register this corporate name as stated registered in my name. If you have any questions concerning this request, please call me at (407) 931-3553.

Sincerely,

Lita V. Ramos
Lita V. Ramos

600 Thacker Ave., Suite D-42
Kissimmee, FL 34741
Tel (407) 931-3553



cc: Articles of Corporation
Registered Agent Request
Certificate of Incorporation

CALL 1/17
gave permission to use
Certificate of inc. (it is complete)
12-21-99 KR

KR
1/17



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

December 6, 2000

MIRACLE HEALTH PRODUCTS, INC.
600 THACKER AVE, STE D-42
KISSIMMEE, FL 34741

We have received your document for MIRACLE HEALTH PRODUCTS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

YOU CAN NOT FILE AN AMENDMENT BEFORE THE ARTICLES ARE FILED. PLEASE ADD THE MISSING INFORMATION TO THE ORIGINAL ARTICLES AND REMOVE THE AMENDMENT. SEVERAL CALLS WHERE PLACE BUT NEVER RETURNED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6924.

Kimberly Rolfe
Corporate Specialist Supervisor

Letter Number: 000A00061688

**CERTIFICATE OF INCORPORATION
OF
MIRACLE HEALTH PRODUCTS, INC.**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of this corporation is:

MIRACLE HEALTH PRODUCTS, INC.

SECOND: Its registered office is the State of Florida is to be 600 Thacker Avenue, Suite D-42, Kissimmee, FL 34741, County of Osceola. The registered agent in charge thereof is **Lita V. Ramos**; address is **600 Thacker Avenue, Suite D-42, Kissimmee, FL 34741**. The principal office shall be the same as the registered office.

THIRD: The nature of the business and the objects and purposes proposed to be transacted, promoted and carried on, are to engage in any lawful act or activities for which corporations may be organized under the General Corporation Law of Florida.

FOURTH: The amount of total authorized capital stock of the corporation is divided into: i.e.: 500 shares of common no par value.

FIFTH: The name and mailing address of the incorporator is:
Lita V. Ramos, 600 Thacker Avenue, Suite D-42, Kissimmee, FL 34741

SIXTH: The powers of the incorporator are to terminate upon filing of the Certificate of Incorporation, and the names and mailing addresses of the persons who serve as directors until the first annual meeting of stockholders or until their successors are elected are as follows:

- | | | | |
|----|---------------|-----------------------------------|---------------------|
| 1. | Raj Ahuja | 2929 E. Michigan Street | Orlando, FL 32811 |
| 2. | Lita V. Ramos | 600 Thacker Avenue,
Suite D-42 | Kissimmee, FL 34741 |

SEVENTH: All of the corporation's issued stock, exclusive of treasury shares, shall be held of record by not more than thirty (30) persons.

EIGHT: All of the issued stock of all classes shall be subject to the following restrictions of transfer permitted by Section 202 of the General Corporation Law.

Each stockholder shall offer to the corporation or to other stockholders of the corporation a thirty-(30) day "first refusal" option to purchase his stock should he elect to sell his stock.

Page 2 – Certificate of Incorporation

NINTH: The Corporation shall make no offering of any of its stock of any class, which would constitute a "public offering" within the meaning of the United States Securities Act of 1933, as it may be amended from time to time.

TENTH: Directors of the corporation shall not be liable to either the corporation or its stockholders for monetary damages for a breach of fiduciary duties unless the breach involves: (1) a director's duty of loyalty to the corporation or its stockholders; (2) acts or omissions not in good faith or which involve intentional misconduct or a knowing violation of the law; (3) liability for unlawful payments of dividends or unlawful stock purchase or redemption by the corporation; (4) a transaction from which the director derived an improper personal benefit.

I, **THE UNDERSIGNED**, for the purpose of forming a corporation under the laws of the State of Florida, do make, file and record this Certificate of Incorporation, and do certify that the facts herein stated are true; and I have accordingly hereunto set my hand.

DATED AT:

Jan 4 2001

Lita Ramos
Lita V. Ramos

NOTARY:



**CERTIFICATION OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.0501, Florida Statutes, the Undersigned Corporation, 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:

MIRACLE HEALTH PRODUCTS, INC.

2. The name and address of the registered agent and office is:

**Lita V. Ramos
600 Thacker Avenue, Suite D-42
Kissimmee, FL 34741**

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TALLAHASSEE, FLORIDA

SIGNATURE:

Lita V. Ramos

TITLE:

DATE:

September 17, 1999

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statute relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

SIGNATURE:

Lita V. Ramos

DATE:

September 17, 1999