## TRANSMITTAL LETTER

## Polosollo62 Department of State

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

SUBJECT:	Health 3 R	TE NAME MUST INCLU	JDE SUFFIX)
		Ot	3 <b>00035899</b> -01/29/010109 *******87.50
Enclosed is an origin	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	E \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO.	FI REQUIRED
FROM:		inted or typed)	)
	15649 SW	73 cm. 7	<u>Ferr.</u> #61
,	miam, Fl.	33193 State & Zip	01 38 1AI
	(305) 383- Daytime Te	305 l lephone number	JAN 29 PA CRETAGY OF S LAHASSEE, FIL
			I: 26

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

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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:  Health 3 Body Inc.			
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  15(A9 Sw 73 Cr) Terr, #61  MIOMI Fl. 33193			
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  WOSSOGE THEORY + BONY + ROTHENTS			
ARTICLE IV SHARES The number of shares of stock is:			
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)  The name(s) and address(es):  SUSAN J. SVENO TEVY. # 6   HARRY OFFICERS/DIRECTORS (optional)  FIGA SW 73 CYL. Tevy. # 6   HARRY OFFICERS/DIRECTORS (optional)  MIAMI, F1. 38193			
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:  SUSAN J. Sherin  15649 SW 73 Crl. Terr. #61  MIAMI, Tol. 33193			
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Susan J. Sherin 15649 Sw 73 Crl. Terr. #61 15649 Sw 73 Crl. Terr. #61 miami Fl., 33193			
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certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity			
Signature/Registered Agent Date			
Signature/Incorporator  Date			