

Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Florida Department of State
Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : ARTURO F. HERNANDEZ & ASSOC. P.A.
Account Number : 119980000084
Phone : (305) 825-0988
Fax Number : (305) 828-8565

FLORIDA PROFIT CORPORATION OR P.A.

HOPE Overweight Clinic & Total Fitness, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	02 ✓
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the Corporation shall be:

HOPE, Overweight Clinic & Total Fitness, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Corporation shall be:

4160 West 16th Avenue, Suite No. 307
Hialeah, Florida 33012

ARTICLE III SHARES

The number of shares of stock that this Corporation is authorized to have outstanding at any one time is:

1,000 Shares at \$ 1.00 per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of initial registered agent are:

Arturo F. Hernandez
4160 West 16th Avenue, Suite No. 307
Hialeah, Florida 33012

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Arturo F. Hernandez
4160 West 16th Avenue, Suite No. 307
Hialeah, Florida 33012


Signature/Incorporator

June 04/ 2002

Date

(An additional article must be added if an effective date is requested)

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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


Signature/Registered Agent

June 04, 2002
Date

This Document was prepared by:

Arturo F. Hernandez
4160 West 16th Avenue, Suite No. 307, Hialeah, Fla
(305) 825-0988

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