# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Art of Inc. File\_

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	Fictitious Name File
	Trade/Service Mark
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	Photo Copy S S S
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
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## ARTICLES OF INCORPORATION

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**OF** 

SECRETARY OF STATE TALLAHASSEE FLORIDA

# NUTRITION MANAGEMENT ASSOCIATES, INC.

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 the corporation is NUTRITION MANAGEMENT ASSOCIATES, INC.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is P.O. Box 9393, Naples, FL 34101.

#### 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 having a par value of (\$1.00) per share.

#### ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is David McElrath, P.A., 3838 Tamiami Trail N, #410, Naples, FL 34103.

#### ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

#### ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the initial of Director of the corporation is Larissa Sgarlato, P.O. Box 9393, Naples, FL 34101.

The undersigned has executed these Articles of Incorporation this 6th day of August 2002.

"Capital Connection, Inc. by Leilani White, Client Representative"

Leilani White

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#### CERTIFICATE OF DESIGNATION

SECRETARY OF STATE REGISTERED OFFICE ALLAHASSEE FLORIDA

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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 cor	poration is:	NUTRITION	MANAGEMENT	
7	ASSOCIATES, INC.	•			
<del></del>		- Park to an ann			
2. is:	The name and stree	PATH P.A.	the registe	ered agent and	d office
	3838 TAMIAMI	TRAIL N,	#410		
	NAPLES, FL	34103	-		

HAVE 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.

D.W. 25