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TRANSMITTAL LETTER

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

~~~~		Nature's Health F	oods & Cafe, I	nc.	
SUBJECT _		(Proposed corporate nar	me-must include suffix	<u>.                                    </u>	
	an origi 0.00	nal and one (1) copy of the art $X$ \$78.75	icles of incorporation\$78.75	and a check for: \$ 87.50	
Filing Fee		Filing Fee Certificate of Status	Filing Fee & Certified (	Filing Fee, Copy Certified Copy & Certificate Of Status	
			ADDITIO	NAL COPY	
				QUIRED	
FROM:	Lela Lilyquist				
PROM.	401 5	Name (Printe South Parsons Ave –	/		
		Add	ress		
	Bran	idon, Fl 33511			
	(813	City, Stat ) 681-7999	te & Zip		
	<del></del>	Daytime Telep	hone Number		

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

FILED

03 JUL -7 PM 4: 44

SECRETARY UP STATE
TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION OF

Nature's Health Foods & Café', 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 shall be:

Natures's Health Foods & Café, Inc.

### ARTICLE II PRINCIPLE OFFICE

The principle place of business and mailing address of this corporation shall be:

3443 Lithia Pinecrest Road – Suite B105 Valrico, Fl 33594

### ARTICLE III SHARES

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

10,000

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lela Lilyquist 401 S Parsons Avenue Suite E Brandon, Fl 33511

### ARTICLE V INCORPORATORS

The <u>name and addresses</u> of the incorporators to these Articles of Incorporation are:

Lela Lilyquist 401 S Parsons Avenue – Suite E Brandon, Fl 33511

The undersigned incorp	porator(s) has (have) ex-	ecuted these Articles o	f
	2nd	July	
Incorporation this	day of	f, 2003.	

Lola R. Lilymist
Signature

03 JUL -7 PM 4:44

#### Articles of Incorporation Filing Fee-\$35.00

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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:

#### Nature's Health Foods & Café, Inc.

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

Lela Lilyquist 401 S Parsons Avenue Suite E Brandon, Fl 33511

HAVING BEEN NAMES 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 MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE Lela Lilyquist
DATE July 2, 03