

PO3000084357

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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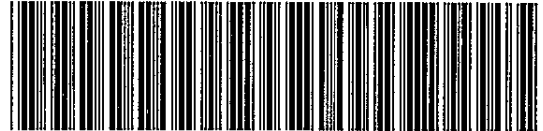
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

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

SUBJECT: ALAREX NUTRITIONAL HEALTH, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: TAJUDEEN LAYI AJAO
Name (Printed or typed)

1173 NW 113 TERRACE
Address

MIAMI, FLORIDA, 33168
City, State & Zip

305-754-5423
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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:

ALAREX NUTRITIONAL HEALTH, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1175 NW 113 TERRACE,
MIAMI, FLORIDA 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NUTRITIONAL COUNSELLING, SALES OF HERBS,
NUTRITIONAL SUPPLEMENTS, GROCERY/PRODUCE,
PERSONAL CARE PRODUCTS.

ARTICLE IV SHARES

The number of shares of stock is:

100,000 SHARES.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ESTHER NGERI FAYSON, 1173 NW 113 TERRACE, MIAMI
FLORIDA 33168 — PRESIDENT

TAJUDEEN LAYI AJAD, 1173 NW 113 TERRACE, MIAMI
FLORIDA 33168 — VICE-PRESIDENT

SHERIFAT BOLANLE ALARE, 1173 NW 113 TERRACE, MIAMI,
FLORIDA 33168. — SECRETARY

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

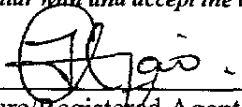
TAJUDEEN LAYI AJAD
1173 NW 113 TERRACE
MIAMI, FLORIDA 33168

ARTICLE VII INCORPORATOR

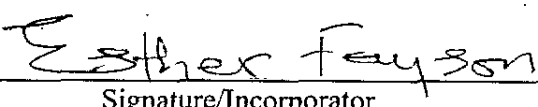
The name and address of the Incorporator is:

ESTHER NGERI FAYSON
1173 NW 113 TERRACE
MIAMI, FLORIDA 33168.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent

07/24/03.
Date


Signature/Incorporator

7/24/03
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA