

P03000123117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

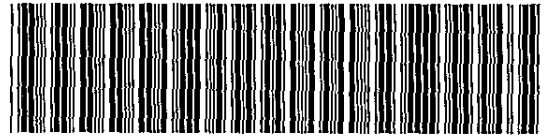
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RECEIVED
03 OCT 31 PM 3:22
STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 OCT 31 PM 3:37

TRANSMITTAL LETTER

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

SUBJECT: _____

CORInnovationsInc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

Orazo Whited
Name (Printed or typed)

291 E Harrison St
Address

Tallahassee FL 32301
City, State & Zip

890-321-5487
Daytime Telephone number

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 OCT 31 PM 3:37
CORIMMORATIONS INC.

ARTICLE I NAME

The name of the corporation shall be:

~~CORIMC~~ CORIMMORATIONS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

251 E Harrison ST Tallahassee, FL 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: This organization is to be established for the purpose of managing and executing integrated medical services. We will provide preventive health consultation and assessment as well as ambulatory medical care and lifestyle medicine. We plan to manufacture the highest quality pharmaceuticals and nutraceuticals possible, in order to address our populations varying health needs.

ARTICLE IV SHARES

The number of shares of stock is:

100 4500 at 3 dollars a share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Orazo Whited 3204 Haack Rd Tall, FL 32305 CEO

SC ST FLEM 3801 Mission Trace Blvd # D-8 Tall, FL 32303 CFO

Gina Pierre 251 E Harrison St Tall, FL 32301 Secretary/Treasurer

Sevilla Bromberg 251 E Harrison St Tall, FL 32301 Medical Director

ARTICLE VI REGISTERED AGENT

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

Jean-Marc St. Fleur
3801 Mission Trace Blvd # D-8

Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Orazo Whited
251 E Harrison St
Tallahassee, FL 32301

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

Jean M St. Fleur
Signature/Registered Agent

10-31-03
Date

Orazo Whited
Signature/Incorporator

31 OCT 03
Date