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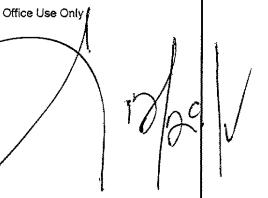
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TRANSMITTAL LETTER

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

SUBJECT:	PROFORMANCE	NUTRITIC	DO LNC.
	(NOT OBED CONT OR	TENAME - MOST MOD	ODE SOFTIA)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	la check for:
☐ \$70.00 Filing Fec	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Marriew T Name 461 Blue Jan	(Printed or typed)	
	Orlando	Address Address State & Zip	8
	407-927-61 Davtime	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)
ARTICLE I NAME The name of the corporation shall be:
PROFORMANCE NUTRITION INC.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: UGI BLUE SAY WAY OCLARIO, FL 32828 ARTICLE III PURPOSE The purpose for which the corporation is organized is:
SAUE OF VITAMINS/WEALTH SUPPLEMENTS 3
The number of shares of stock is:
200 shares
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):
Marthen Tolly 461 Bluesay Way President Orlando, Pl 32828
Richard Noursian " " CEO
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:
Matthew Tully 461 Blue Day Way Orlando, FL 32828
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
Marthew Tully 461 Blue Jay Way Orlando, FL 32828

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
Matthewsture 12-11-03
Signature/Registered Agent Date

. Mythan Turner Signature/Incorporator