

P04 0000 34601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

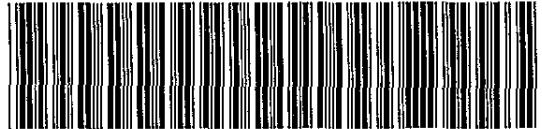
(Business Entity Name)

(Document Number)

Certified Copies 1 Certificates of Status       

Special Instructions to Filing Officer:

Office Use Only



100028809521

02/23/04--01057--006 \*\*78.75

DIVISION OF CORPORATION

04 FEB 23 PM 1:38

RECEIVED

04 FEB 23 PM 1:33

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

FILED

F. CHASSER

FEB 23

## TRANSMITTAL LETTER

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

SUBJECT: Healthy Traditions Magazine, Inc.  
(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:

Vanessa Byrd-Murphy  
Name (Printed or typed)

3104 Fulmer Circle  
Address

Tall. FL 32303  
City, State & Zip

850-536-5822  
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)

## ARTICLE I NAME

The name of the corporation shall be:

Healthy Traditions Magazine, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 180297, Tallahassee FL. 32318

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Vanessa Byrd - President (EO)  
P.O. BOX 180297  
Tall. FL 32318

## ARTICLE VI REGISTERED AGENT

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


Vanessa Byrd - 3104 Fulmer Circle  
Tall. FL 32303

## ARTICLE VII INCORPORATOR

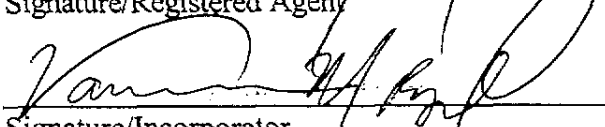
The name and address of the Incorporator is:

Vanessa Byrd - 3104 Fulmer Circle  
Tall. FL 32303

\*\*\*\*\*  
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

2/23/04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

2/23/04  
\_\_\_\_\_  
Date

FILED  
04 FEB 23 PM 1:33  
CLERK OF STATE  
TALLAHASSEE, FLORIDA