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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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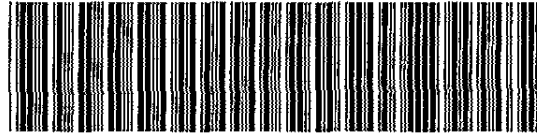
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06/2/07

TRANSMITTAL LETTER

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

SUBJECT: Milrom HERBS 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: SANDRA MILLER
Name (Printed or typed)

1126 Blackjack Ridge St
Address

Clermont, FL 34711
City, State & Zip

352-243-6342
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:

Millrom HERBS, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1126 Blackjack Ridge St.
Clermont, FL 34711

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To educate and provide the general public with knowledge and herbs over the Internet.

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SANDRA MILLER - PRESIDENT
SHIRLEY ROMER - VICE PRESIDENT
SANDRA MILLER - SECRETARY
SHIRLEY ROMER - TREASURER

ARTICLE VI REGISTERED AGENT

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

SHIRLEY ROMER
1126 Blackjack Ridge St
Clermont, FL 34711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SANDRA MILLER
1126 Blackjack Ridge St
Clermont, FL 34711

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

Shirley Romer
Signature/Registered Agent

Shirley Romer 3-8-04
Date

Sandra Miller
Signature/Incorporator

3-8-04
Date

Sandra Miller

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA