

P04000090085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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04 JUN -9 PM 1:45

REC'D  
DIVISION  
JUN 10 2004

## TRANSMITTAL LETTER

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

SUBJECT: NATURAL FREEDOM TOO, 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: JOSEPH P. MINAUDO, JR., P.C.  
Name (Printed or typed)

374 W. NEPESSING STREET, SUITE 103  
Address

LAPEER, MI 48446  
City, State & Zip

(810) 667-6907  
Daytime Telephone number

04 JUN -9 PM 1:45  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**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:

NATURAL FREEDOM TOO, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1526 S. WASHINGTON, TITUSVILLE, FL 32796

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DISABLED PERSON CARE

### ARTICLE IV SHARES

The number of shares of stock is:

50,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SHARON B. BATES  
1526 S. WASHINGTON, TITUSVILLE, FL 32796  
PRESIDENT

### ARTICLE VI REGISTERED AGENT

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

SHARON B. BATES  
1526 S. WASHINGTON, TITUSVILLE, FL 32796

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHARON B. BATES  
1526 S. WASHINGTON, TITUSVILLE, FL 32796

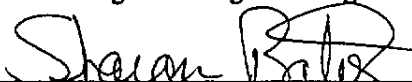
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
JUNE 7, 2004

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
JUNE 7, 2004

\_\_\_\_\_  
Date

FILE  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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