# P05000011000

(Requestor's Name)				
(Address)				
, ,				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
, , , ,				
(Document Number)				
Certified Copies Certificates of Status				
Constallant and a filling off				
Special Instructions to Filing Officer:				





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C.S.10

# TRANSMITTAL LETTER

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

SUBJECT: NUTRI	FION +INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUNTA
Enclosed are an orig	mal and one (1) copy of the art	icles of incorporation and	l a check for:
☐ \$70.00 Filing Fee	\$78.75 Filing Fee	\$78.75 Filing Fee	S87.50 Filing Fee,
Ü	& Certificate of Status	& Certified Copy	
		ADDITIONAL CO	
FROM: BR	IAN YUSEM		
	Name	(Printed or typed)	
	4251 N. FEDERAL HWY #4	- <u></u>	
		Address	
<u>1</u>	BOCA RATON, FLORIDA 33431		
	City	, State & Zip	. ***
<u>.</u>	561.750.1870		
	Daytime :	Felephone 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:

**NUTRITION + INC.** 

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4251 N. FEDERAL HWY #4
BOCA RATON FLORIDA 33431

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR PROFIT

### ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BRIAN YUSEM, DIRECTOR

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

BRIAN YUSEM 4251 N. FEDERAL HWY #4 BOCA RATON FLORIDA 33431

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BRIAN YUSEM 4251 N. FEDERAL HWY #4 BOCA RATON FLORIDA 33431

**************************************	or the above stated corporation at the place designated in
certificate, I am familiar with and accept the appointment as registered	agent and agree to act in this capacity
100	1/1/05
Signature/Registered Agent	Date
	1/1/05
Signature/Incorporator	Date

FILED
SECRETALSEE, FLORIDA

this