

PO5000011094

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000017519 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

FILED
JAN 21 11 08:45
STATE
OFFICE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

Complete Home Remedies Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

10
1-24

H05000017519 3

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:
COMPLETE HOME REMEDIES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
501 RIVIERA DRIVE
ALTAMONTE SPRINGS, FL 32701

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:
1500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers:

President: BRUCE A. WALTERS ; 501 RIVIERA DRIVE
ALTAMONTE SPRINGS, FLORIDA 32701

Vice-President: HEIDI D. WALTERS ; 501 RIVIERA DRIVE
ALTAMONTE SPRINGS, FLORIDA 32701

ARTICLE VI REGISTERED AGENT

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

HEIDI WALTERS
501 RIVIERA DRIVE
ALTAMONTE SPRINGS, FLORIDA 32701

FILED IN THE STATE OF FLORIDA

05 JAN 21 AM 8:45

FILED

H05000017519 3

H05000017519 3

PAGE 2 COMPLETE HOME REMEDIES INC.

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

HEIDI WALTERS
501 RIVIERA DRIVE
ALTAMONTE SPRINGS, FLORIDA 32701

Having been named as registered agent to accept service of process for the above 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.

Heidi Walters 1/20/05
HEIDI WALTERS / Registered Agent Date

Heidi Walters 1/20/05
HEIDI WALTERS / Incorporator Date

STATE OF FLORIDA
COUNTY OF ALACHUA
JAN 21 11 08 AM '05
HEIDI WALTERS

H05000017519 3