

P050000/3341

(Requestor's Name)



RICHARD & KAREN COCHRAN
8903 ABERDEEN CREEK CIR.
RIVERVIEW, FL 33569

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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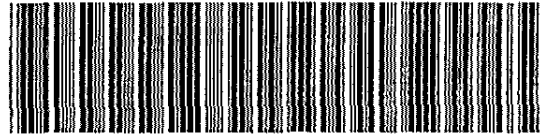
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 JAN 21 PM 2:33
CLERK OF STATE
TALLAHASSEE, FLORIDA

V/L
1/24/05

TRANSMITTAL LETTER

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

SUBJECT: HEALTHPRO VITAMINS + NUTRITION, 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: RICHARD S. COCHRAN
Name (Printed or typed)
8903 ABERDEEN CREEK CIRCLE
Address
RIVERVIEW, FLORIDA 33569
City, State & Zip
(813) 477-3842
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)

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ARTICLE I NAME

The name of the corporation shall be:

HEALTHPRO VITAMINS + NUTRITION, INC.

CLERK OF THE CLERK OF THE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8903 ABERDEEN CREEK CIRCLE
RIVERVIEW, FLORIDA 33569

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR PROFIT-VITAMIN SALES

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RICHARD S. COCHRAN
8903 ABERDEEN CREEK CIRCLE
RIVERVIEW, FLORIDA 33569
PRESIDENT

KAREN S. COCHRAN
8903 ABERDEEN CREEK CIRCLE
RIVERVIEW, FLORIDA 33569
SECRETARY/TREASURER

ARTICLE VI REGISTERED AGENT

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

RICHARD S. COCHRAN
8903 ABERDEEN CREEK CIRCLE
RIVERVIEW, FLORIDA 33569

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RICHARD S. COCHRAN
8903 ABERDEEN CREEK CIRCLE
RIVERVIEW, FLORIDA 33569

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

Date

01-15-05

Signature/Incorporator

Date

01-15-05