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SECRETARY OF STATE
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 208056 -8820A

AUTHORIZATION : *Patricia P.*

COST LIMIT : \$ 78.75

ORDER DATE : February 16, 2005

ORDER TIME : 12:07 PM

ORDER NO. : 208056-005

CUSTOMER NO: 8820A

CUSTOMER: Robert Bruce Snow, Esq
Robert Bruce Snow, Esq

112 North Orange Avenue

Brooksville, FL 34601

DOMESTIC FILING

NAME: SNDA, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS: _____

**ARTICLES OF INCORPORATION
FOR SUB S CORPORATION FOR
SNDA, INC.**

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2005 FEB 16 P 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purposes of engaging and organizing a corporation under the laws of the State of Florida, does hereby associate herself and adopt the following Articles of Incorporation for such corporation:

I. **NAME**: The name of the corporation shall be SNDA, INC., and it is to be located at 12082 Cortez Boulevard, Brooksville, Hernando County, Florida 34613.

II. **BUSINESS PURPOSE**: The nature and purpose of the corporation will be to own and operate an herbal supplement business and all other activities associated with the business. The corporation shall be authorized and able to do all lawful business which the laws of the State of Florida allow for corporations organized under the laws of the State of Florida.

III. **CAPITAL STOCK**: The amount of total authorized capital stock of this corporation shall be 100 shares of stock with no par value.

IV. **INITIAL CAPITAL**: The amount of the capital with which the corporation will begin business with is the sum of \$1,000.00.

V. **TERM**: The term of duration of the corporation shall be perpetual.

VI. **ADDRESS**: The initial street address and post office mailing address of the principal office of the corporation shall be:

12082 Cortez Boulevard
Brooksville, Florida 34613

VII. **OFFICERS**: The corporation shall have one corporate officer as follows:

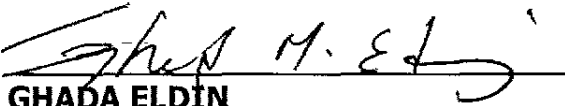
<u>NAME</u>	<u>OFFICE</u>	<u>ADDRESS</u>
GHADA ELDIN	President/Owner	12082 Cortez Boulevard Brooksville, FL 34613

VIII. **SUBSCRIBERS**: The name, address and number of shares of the subscriber of the corporation is as follows:

<u>NAME</u>	<u>ADDRESS</u>	<u>NO. OF SHARES</u>
GHADA ELDIN	12082 Cortez Boulevard Brooksville, FL 34613	100

IX. **REGISTERED AGENT**: The name and address of the registered agent of the corporation is GHADA ELDIN, whose street and mailing address is 12082 Cortez Boulevard, Brooksville, Florida 34613, who is a resident of the County of Hernando, State of Florida.

IN WITNESS WHEREOF, I have hereunto signed these Articles of Incorporation on the 10 day of February, 2005.


GHADA ELDIN

**STATE OF FLORIDA
COUNTY OF HERNANDO**

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named in the above to take acknowledgments, personally appeared **GHADA ELDIN**, to me known to be the person described as the subscriber in and who acknowledged before me that she executed the same and subscribed to these Articles of Incorporation.

WITNESS my hand and official seal in the County and State last above said this 10 day of February, 2005.

My Commission Expires:
{Notary Stamp}



Mary Robinson

Notary Public

ACCEPTANCE OF REGISTERED AGENT

I CERTIFY that I am a permanent resident of Hernando County, Florida, residing at 12082 Cortez Boulevard, Brooksville, Hernando County, Florida 34613. I hereby accept the foregoing designation as Registered Agent.

EXECUTED this 10 day of February, 2005.

Ghada M. Eldin

GHADA ELDIN
Registered Agent

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TALLAHASSEE, FLORIDA