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TRANSMITTAL LETTER

SUBJECT: INNOVATIVE LABORATORIES INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$70.00 ing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	•	ADDITIONAL CO	PY REQUIRED
، ROM:	·MICHAEL PA	205 INNO	VATIVE LABO

NOTE: Please provide the original and one copy of the articles.

504 -669 - 4584 Daytime Telephone number

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:	
INNOVATIVE LABORATORIES , INC	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 6822 22NO AUDNUE NORTH PMB 57. PETERSBURG FL 337/0	114
The purpose for which the corporation is organized is:	
ANY LAWFUL PURPOSE	
ARTICLE IV SHARES The number of shares of stock is: / 00	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): MICHAEL PAZOS 566 UILLA GRENDE AUE SOUTH	FILED 05 MAR 23 PM 35 VALUAN OF TALLAHASSEE, F
ST PETER SBURG , FL 33707	D # 3: 29 FICKID
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the register.	به بدار.
MICHABL PAZOS 566 VILLA GRENDE AVE SOUTH	•
ST. PETERSBURG, FL 33707 ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
MIGHAEL PAZOS 566 VILLA GRANOE AVE SOUTH	
ST. PETERS BURG FL 33707	********
Having been named as registered agent to accept service of process for the above stated corporatificate, I am familiar with and accept the appointment as registered agent and agree to act	
Signature/Registered Agent	Date,
Mulus///	3/18/2005
Signature/Incorporator	Date