

POS 000046639

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(Address)

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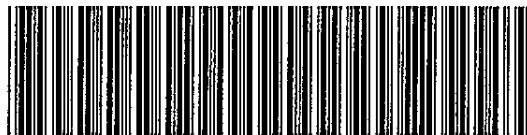
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/23/05--01057--006 **78.75

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CLERK OF COURT
HALL COUNTY, GEORGIA

TRANSMITTAL LETTER

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

SUBJECT: Selfhealth.US, 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: Michael C. Berry, Sr., Attorney

Name (Printed or typed)

1106 N. Fort Harrison, Suite 1

Address

Clearwater, Florida 33755

City, State & Zip

PH: 727-447-0533 Fax: 727-446-3033 E-mail: mcberry@berrylaw.com

Daytime Telephone number

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

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

*Thank you,
M. C. Berry*

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: Selfhealth.US, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

611 Druid Road
Suite 403
Clearwater, Florida 33756

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All lawful business

ARTICLE IV SHARES

The number of shares of stock is: One Hundred (100)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Director/President: Wolf Dieter Lahmann
611 Druid Road
Suite 403
Clearwater, Florida 33756

Director/Vice President: Torsten Forberger
31 Freshfield Bank
Forest Row
RH 18 5HQ GB

Director: Ulrich Sommer
30 Turner Street #806
Clearwater, Florida 33756

Secretary: Kathleen E. Lettau
611 Druid Road
Suite 403
Clearwater, Florida 33756

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

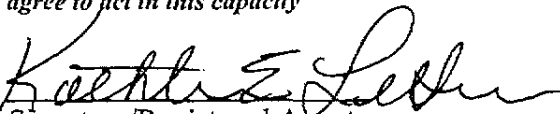
Kathleen E. Lettau
611 Druid Road
Suite 403
Clearwater, Florida 33756

ARTICLE VII INCORPORATOR

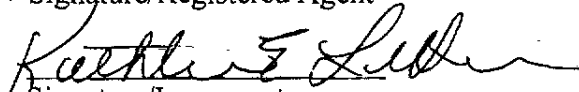
The **name and address** of the Incorporator is:

Kathleen E. Lettau
611 Druid Road
Suite 403
Clearwater, Florida 33756

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 3-15-05


Signature/Incorporator

Date 3-15-05

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TALLAHASSEE, FLORIDA