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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

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

SUBJECT: Enlightened Living Incorporated  
(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: Tara L. Manis-Healey  
Name (Printed or typed)  
15369 Los Angeles Dr  
Address  
Loxahatchee FL 33470  
City, State & Zip  
561-662-9393  
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)

## ARTICLE I NAME

The name of the corporation shall be:

Enlightened Living Incorporated

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12773 W. Forest Hill Blvd Ste 1205  
Wellington Fl 33414

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation

## ARTICLE IV SHARES

The number of shares of stock is:

10

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Tara L. Manis-Healey, Owner, President  
15369 Los Angeles Dr  
Loxahatchee Fl 33470

## ARTICLE VI REGISTERED AGENT

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

Tara L. Manis-Healey  
15369 Los Angeles Dr  
Loxahatchee Fl 33470

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tara L. Manis-Healey  
15369 Los Angeles Dr.  
Loxahatchee Fl 33470

\*\*\*\*\*

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

Tara L. Manis-Healey  
Signature/Registered Agent

3-18-05  
Date

Tara L. Manis-Healey  
Signature/Incorporator

3-18-05  
Date

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TALLAHASSEE, FLORIDA