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COVER LETTER

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

SUBJECT:	Healthy E (PROPOSED CORPOR	WE Remed	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	MARY S Name 520 5 H aus	DUNCAN (Printed or typed) Address	
	Tallahass E	F F 32 , State & Zip	2303

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)	FILED
ARTICLE I NAME	05 OCT -4 PM 12: 12
The name of the corporation shall be:	- - · · ·
The name of the corporation shall be: Healthy Ewe Hemedius Co.	SECRLIARY OF STAIL_ TALLAHASSEE, FLORIDA
ARTICLE II _ PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
The principal place of pusiness/mailing address is: 520 5th Avenne, West	
Tallahassee, FL 32303	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Prof. t	
ARTICLE IV SHARES	
The number of shares of stock is:	
100	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s):	
Itabukumin O. Adewale, CEC	9
520 5th Avenue, West	
520 5th Avenue, Wist Tallahassee, FL 32303	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the region	istered agent is:
Mary Duncan	
520 5th Avenue, West	
Tallahussee, F2 32383 ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
SIA Ann Walker 3713-A Rockbrook Dr.	
3713-A Rakburk Dr.	
Tallahassee, FL 32311	*******
Having been named as registered agent to accept service of process for the above stated co	
certificate, I am familiar with and accept the appointment as registered agent and agree to a	ici in this capacity
JHIN	10/4/05
Signature/Registered Agent	Date/
Joseph Jacken	10/01/05