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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## **COVER LETTER**

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

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SUBJECT:	The Goodness PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUSSES	
B. C. J.		· .	<b></b>	
Enclosed are an orig	ginal and one (1) copy of the arti	cies of incorporation and	a Check Iof:	
\$70.00	<b>\$78.75</b>	\$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
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	and a local age	Cama -		
FROM: The Goodness Care The.  Name (Printed or typed)				
2764 Pornician Circle				
Kissimmee FL 34746 City, State & Zip				
	407-401-9	733		
H07-401-9733  Daytime Telephone number				

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

#### ARTICLES OF INCORPORATION

#### ARTICLE I - NAME

The name of the corporation shall be The Goodness Care, Inc.

#### ARTICLE II - PRINCIPLE OFFICE

The principal place of business address is 2764 Patrician Circle, Kissimmee, FL 34746.

#### ARTICLE III - PURPOSE

The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the general corporation law of Florida.

### ARTICLE IV - SHARES

The number of shares of stock is 1500.

#### ARTICLE V - INITIAL OFFICERS

Jayeola Enigbonjaye – President 2764 Patrician Circle Kissimmee, FL 34746

Helen Enigbonjave - Secretary 2764 Patrician Circle Kissimmee, FL 34746

# <u> ARTICLE VI – REGISTERED AGENT</u>

Jayeola Enigbonjaye 2764 Patrician Circle Kissimmee, FL 34746

#### ARTICLE VII - INCORPORATOR

Helen Enigbonjave 2764 Patrician Circle Kissimmee, FL 34746

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.

Jaycola Enigbonjaye/Registered Agent

Helen Enigoonjave/Incorporator

Thate

3/27/06