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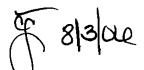
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ORIGINAL

TRANSMITTAL LETTER

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

(Daytime Telephone Number)

SUBJECT: BODY MORPH WEIGHT-LOSS CONSULTING, INC. (Proposed Corporation name-must include suffix) Enclosed is an original and one (1) copy of Articles of Incorporation and a check for: \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status 38 \$78.75 Filing Fee & Certified Copy □ 🛬 \$87.50 Filing Fee, Certified Copy & Certificate Derrick Boldin (Name-Printed or Typed) 239 Begonia Drive (Address) Pahokee, FL 33476 (City, State, Zip) (561) 601-6816

NOTE: PLEASE PROVIDE ONE (1) COPY AND ONE (1) ORIGINAL

ARTICLES OF INCORPORATION FOR BODY MORPH WEIGHT-LOSS CONSULTING, INC.

Article I-Name The name of the Corporation shall be: BODY MORPH WEIGHT-LOSS CONSULTING, INC.

<u>Article II-Duration</u>

This Corporation shall exist perpetually

Article III-Purpose

The general purpose of the business is:
TO PROVIDE PERSONAL WEIGHT-LOSS TRAINING & CONSULTING SERVICES VIA
THE INTERNET.

Article IV-Capital Stock

The corporation is authorized to issue 500 shares of common stock with no par value.

Article V-Principle Office Address and Registered Agent
The Principal Office Address of the Corporation is:
239 Begonia Drive- Pahokee, FL 33476
The Registered Agent is:
Derrick Boldin.

Article VI- Initial Officers/Board of Directors The Officers of the Corporation are:

<u>Name</u>

<u>Address</u>

President: Derrick Boldin

239 Begonia Drive-Pahokee, FL 33476

Secretary & Treasurer: Andrea Swaby

239 Begonia Drive-Pahokee, FL 33476

Article VII-Incorporator

The name and address of the person signing these Articles of Incorporation is:

Derrick Boldin 239 Begonia Drive Pahokee, FL 33476

Article VIII-Amendment

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholder is subject to this reservation.

Owner's Name: Derrick Boldin	Date: 8-1-06
*****************	***************
Having been named as registered agent and stated corporation at the place designated in with the provisions of all statues relating to duties, and I am familiar with and accept the to act in this capacity.	n this certificate, I further agree to comply the proper and complete performance of my
Dent Solution Signature/Registered Agent	8-1-06 Date
Quil bols	8-1-06 Data