

PO6000107288

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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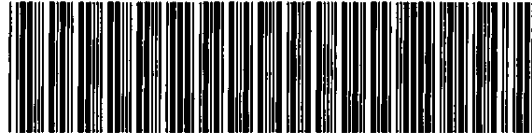
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Da

COVER LETTER

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

SUBJECT: Healthy Life Gourmet, 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: Paris DeFeis
Name (Printed or typed)

8587 Wakefield Drive
Address

Palm Beach Gardens, FL 33410
City, State & Zip

561-691-9005
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:

Healthy Life Gourmet, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8587 Wakefield Drive, Palm Beach Gardens, FL 33410

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct all lawful business in the state of Florida

ARTICLE IV SHARES

The number of shares of stock is:

The corporation is authorized to issue 10,000 shares.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Paris DeFeis, Director: 8587 Wakefield Drive, Palm Beach Gardens, FL 33410

Bart Castellano, Director: 3352 Barrow Island Road, Jupiter, FL 33477

ARTICLE VI REGISTERED AGENT

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

Paris DeFeis, 8587 Wakefield Drive, Palm Beach Gardens, FL 33410

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Paris DeFeis, 8587 Wakefield Drive, Palm Beach Gardens, FL 33410

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



Signature/Incorporator



Date



Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA