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(Requestor's Name)

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(City/State/Zip/Phone #)

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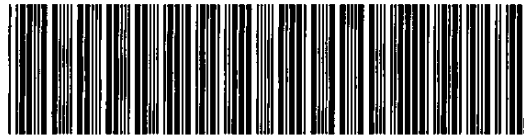
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2006 AUG 28 AM 11:11

FILED

Submitted AUG 29 2006

## TRANSMITTAL LETTER

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

SUBJECT: JOE NATURE'S WAY CARE, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: JAMES SIMPSON  
Name (Printed or typed)

771 SW South MACEDO Blvd  
Address

Port St. Lucie, Florida 34983  
City, State & Zip

(561) 873-1818  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

**OF**

**J & E NATURE'S WAY CAFÉ, INC.**

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I. NAME**

The name of this corporation shall be:

**J & E NATURE'S WAY CAFÉ, INC.  
5313 NW ALOHA STREET  
PORT ST. LUCIE, FLORIDA 34986**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE II. INITIAL REGISTERED OFFICE AND MAILING ADDRESS**

The street address of the initial registered office of this corporation is 5313 NW ALOHA STREET, PORT ST. LUCIE, FLORIDA 34986.

**ARTICLE III. CAPITALIZATION**

The aggregate number of shares which the corporation is authorized to issue is 1,000. Such shares shall be of a single class, and shall have a par value of \$1.00 per share.

**ARTICLE IV. INITIAL REGISTERED AGENT**

The name and address of the initial registered agent is:

**ELEONORA LUCAS  
5313 NW ALOHA STREET  
PORT ST. LUCIE, FLORIDA 34986**

**ARTICLE V. INCORPORATOR**

The name and address of the Incorporator to these Articles of Incorporation are:

**JOSEPH A. LUCAS, JR.  
5313 NW ALOHA STREET  
PORT ST. LUCIE, FLORIDA 34986**

  
Signature/Incorporator

8-23-2006  
Date

## ARTICLE VI. INITIAL BOARD OF DIRECTORS

This Corporation shall have the following Directors initially. The number of directors may be either increased or decrease from time to time in accordance with the provisions of the By-Laws. The name and address of the initial Directors of this Corporation are:

President - Joseph A. Lucas, Jr.  
5313 NW Aloha Street  
Port St. Lucie, Florida 34986

Vice President - Eleonora Lucas  
5313 NW Aloha Street  
Port St. Lucie, Florida 34986

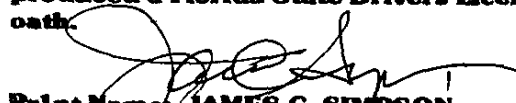
*Having been named as the registered agent and to accept service for the above stated corporation at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*


  
Signature/Registered Agent

8-23-2006  
Date

### STATE OF FLORIDA COUNTY OF ST. LUCIE

The foregoing instrument was acknowledged before me this 23<sup>rd</sup> day of August 2006 by Joseph A. Lucas, Jr. who is personally known to me or who has produced a Florida State Drivers License as identification and who did not take an oath.

  
Print Name: JAMES C. SIMPSON  
NOTARY

NOTARY PUBLIC-STATE OF FLORIDA  
 James C. Simpson  
Commission #DD579964  
Expires: SEP 13, 2010  
BONDED THRU ATLANTIC BONDING CO., INC.