## P06000127446

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



500079274575

09/07/06--01018--007 \*\*87.50

DIVISION OF CONFORATIONS

W06-39422

B McKnight OCT DE 2006

## **COVER LETTER**

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

SUBJECT: Citrum Nutraceuticals, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
(PROPOSED CORPORA)  Enclosed are an original and one (1) copy of the articles			
S70.00 S78.75 Filing Fee Filing Fee & Certificate of Status  C τρ + 1 Fi ed Coργ	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED	
FROM: Kristian Meconame  17/50 N. Bay  Sunny Isls, FL  City,	RJ #2916. Address		
954-295-097 Daytime T	2 / . Telephone number		

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 7, 2006

KRISTIAN MECOLI 17150 N BAY RD #2916 SUNNY ISLES, FL 33160

SUBJECT: CITRUM NUTRACEUTICALS, INC.

Ref. Number: W06000039422

We have received your document for CITRUM NUTRACEUTICALS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Letter Number: 306A00054260

Becky McKnight
Document Specialist
New Filing Section

## 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: Citrum Nutraceuticals, Inc ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5009 Harrison St Hollywood, FC 33021 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Nutraceuticals, Vitamins, Etc, Commerce. Selling OF Nutraceuticals. ARTICLE IV SHARES The number of shares of stock is: 1,000,000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Kristin Mecoli, president 17150 N. BAY Rd Apt 2916. Miami, FL 33160. ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Gabe Nichols 5009 Harrison St Hollywood, FC 33021 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Kristian Mecoli 17150 N. BAY Rd # 2916

Signature/Incorporator

Date

Signature/Incorporator

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this

SUNNY ISLAS, FL 33160.