

PD7000045276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

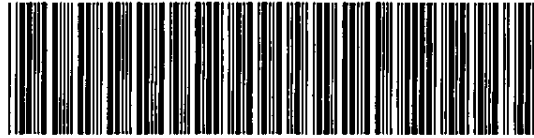
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Special Instructions to Filing Officer:

~~W07-15754~~

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2007 APR 12 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

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

SUBJECT: NUTRITIONAL HEALING, 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: ERIC LA CHAPPELLE
Name (Printed or typed)

12618 MAYPAC DRIVE
Address

BOCA RATON, FL 33428
City, State & Zip

(561) 504-6823
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 30, 2007

ERIC LA CHAPELLE
12618 MAYPAN DRIVE
BOCA RATON, FL 33428

SUBJECT: NUTRITIONAL HEALING, INC.
Ref. Number: W07000015754

We have received your document for NUTRITIONAL HEALING, INC.. However, the document has not been filed and is being returned for the following:

The document must state the number of shares of authorized stock.

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) 245-6934.

Loria Poole
Document Specialist
New Filing Section

Letter Number: 607A00021917

RECEIVED
07 APR 12 PM 12:57
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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:

NUTRITIONAL HEALING, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12618 MAYPAN Drive, Boca Raton, FL 33428

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide consultation on Nutrition.

ARTICLE IV SHARES

The number of shares of stock is:

100 ~~(2000)~~ SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ERIC LACHAPPELLE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE VI REGISTERED AGENT

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

ERIC LACHAPPELLE
12618 MAYPAN Drive, Boca Raton, FL 33428

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ERIC LACHAPPELLE
12618 MAYPAN Drive, Boca Raton, FL 33428

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

3/23/07

Date

3/23/07

Date