

MAY 08 2007 10:38 PM
Capital Connection

CAPITAL CONNECTION

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Florida Department of State
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To: Division of Corporations
Fax Number : (850)205-0381

From: Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850)224-9970
Fax Number : (850)224-7047

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION

NUTRITION DIALOG, INC.

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**ARTICLES OF INCORPORATION
OF
NUTRITION DIALOG, INC.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **NUTRITION DIALOG, INC.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **2108 Oceanview Drive, Tierra Verde, FL 33715**

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

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TALLAHASSEE, FLORIDA

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Jon C. Kieffer, 6670 First Avenue South, St. Petersburg, Florida 33707**

ARTICLE V: OFFICER & DIRECTOR


The name and address of the initial Officer and Director of the corporation is:
Christina Ruggiero, Director, 2108 Oceanview Drive, Tierra Verde, FL 33715

ARTICLE VI: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is **Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.**

The undersigned has executed these Articles of Incorporation this 8th day of May 2007.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"



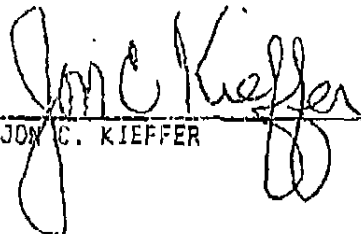
CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

In accordance to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: NUTRITION DIALOG, INC.

2. The name and street address of the registered agent and office is: _____
JON C. KIEFFER
6670 First Avenue South
St. Petersburg, Florida 33707

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE 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.



JON C. KIEFFER