

PO70000070649

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

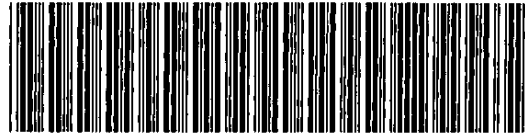
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000104216420

06/15/07--01026--010 **87.50

FILED

07 JUN 15 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/11

COVER LETTER

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

SUBJECT: VITAL BREATH COMPANY
(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: LUIS CARRAZANA
Name (Printed or typed)

PO BOX 348453
Address

CORAL GABLES FL 33234
City, State & Zip

305 479 6249
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:

VITAL BREATH COMPANY

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2500 DOUGLAS RD
SUITE B
CORAL GABLES FLORIDA 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SERVICES AND PRODUCTS DISTRIBUTION

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000 SHARES AUTHORIZED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

LUIS CARRAZANA, DPS
2500 DOUGLAS RD
SUITE B
CORAL GABLES FLORIDA 33134

ARTICLE VI REGISTERED AGENT

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

LUIS CARRAZANA
2500 DOUGLAS RD
SUITE B
CORAL GABLES FLORIDA 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LUIS CARRAZANA
2500 DOUGLAS RD
SUITE B
CORAL GABLES FLORIDA 33134

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

FILED
07 JUN 15 PM 4:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUNE 12, 2007

Date

JUNE 12, 2007

Date