# Po7000113133

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(Address)				
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## **COVER LETTER**

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

SUBJECT: Nu You Co.			
(P.	ROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and o	one (1) copy of the artic	cles of incorporation and	l a check for:
			D #07.50
\$70.00 \$78.		\$78.75	<b>■ \$87.50</b>
Filing Fee Filing I	ree ificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy
& Cert	incate of Status	& Ceruneu Copy	& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
FROM: Maureen B	uchbinder		
	Name	(Printed or typed)	
0040 1114	/ 50 Otrot		
3819 NV	V 53 Street		<del></del>
	F	Address	
Boca Ra	ton, Florida 33496		
		State & Zip	<del></del>
561 929 (	6798		
		elephone number	
	24,000		

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





# RECEIVED

07 OCT 15 AM 11: 42

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

October 4, 2007

MAUREEN BUCHBINDER 3819 NW 53 STREET BOCA RATON, FL 33496

SUBJECT: NUYOU CO.

Ref. Number: W07000049192

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

Complete articles I thru VII.

The registered agent must sign accepting the designation.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2008 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return 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 Regulatory Specialist II

Letter Number: 507A00058065

Division of Compositions BO DOV 6297 Tollahassas Florida 29214

## 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:

NuYou Co.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of husiness/mailing address is: 3819 NW 53 St. Boca Raton, Fla 33496

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To start a business in coaching people on nutrition.

#### ARTICLE IV **SHARES**

The number of shares of stock is: one (1)

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

3819 NW Maureen Buchbinder: President

53 St. Boca Raton, Fla 33496

ARTICLE VI	REGISTERED	<u>AGENT</u>

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Maureen Buchbinder 3819 NW 53 St. Boca Raton, Fla 33496

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
Maureen Buchbinder 3819 NW 53 St. Boca Raton, Fla 33496

**************************************			
Signature/Registered Agent	Date		
Mr. Southon	10/10/07		
Signature/Incorporator	Date		

2007.OCT 15 PH 4: 06
SECRETARY OF STATE
TALLAHASSEF FINALE