

PD7000121665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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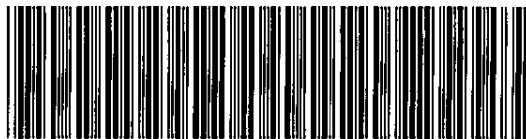
(Business Entity Name)

(Document Number)

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07 NOV - 7 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: Healthy LifeStyle Miami, 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: Healthy LifeStyle Miami, INC.

Name (Printed or typed)

3189 SW 152 CT

Address

MIAMI, FL 33185

City, State & Zip

(305) 485-3501 / (786) 312-7394

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:

Healthy LifeStyle Miami, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
3189 SW 152 CT. MIAMI, FL 33185

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Whole sales and retail of medical equipment, fitness equipment, vitamins, supplements, food- healthy products, fitness appearance, fitness assessment, spa and beauty products.

ARTICLE IV SHARES

The number of shares of stock is:

1000 shares- individual par value of \$20

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Soraya Rodriguez: 3189 SW 152 CT. MIAMI,
FL 33185: President.

Rafael Pineyro: 3189 SW 152 CT. MIAMI, FL
33185: Director.

Yuri Rodriguez: 3189 SW 152 CT. MIAMI, FL
33185: Secretary.

Gerardo Rodriguez: 3189 SW 152 CT. MIAMI,
FL 33185: Treasure.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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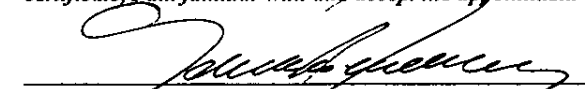
ARTICLE VI REGISTERED AGENT


The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:
Gerardo Rodriguez: 3189 SW 152 CT. MIAMI, FL 33185

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:
Gerardo Rodriguez: 3189 SW 152 CT. MIAMI, FL 33185

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

11/5/2007
Date
11/5/2007
Date

APPROVED
AND
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA