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(Requestor's Name)

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(City/State/Zip/Phone #)

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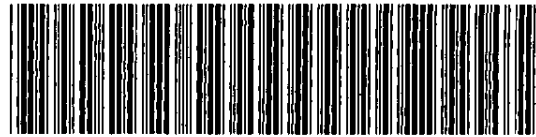
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**TRANSMITTAL LETTER**

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

**SUBJECT:** NUTRIBIO HEALTH, 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:** Dr. John G. Pierre, Registered Agent  
Name (Printed or typed)

331 Coral Trace Lane  
Address

Delray Beach, Florida 33445  
City, State & Zip

(786)222-3236  
Daytime Telephone number

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

## **Articles of Incorporation**

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation:

### **FIRST**

The name of the corporation is: **NUTRIBIO HEALTH, INC.**

### **SECOND**

The period of its duration is Indefinite.

### **THIRD**

The purpose of the corporation is: Wholesale-Retail, Health Products

### **FOURTH**

The aggregate number of authorized shares is 200 shares Par-Value \$5.00

### **FIFTH**

The corporation will not commence business until at least One Thousand (\$1,000.) Dollars have been received by it as consideration for the issuance of Shares.

### **SIXTH**

Cumulative Voting of shares of stock are authorized.

### **SEVENTH**

Provisions Limiting or denying to shareholders the preemptive right to acquire additional or treasury shares of the corporation are: Approved by both the Stockholders and Board of Directors.

### **EIGHT**

Provisions for regulating the internal affairs of the corporation are The Managing Partners (Corporate Officers) will be responsible for all day to day operation.

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### **NINTH**

The address of the initial Registered Office of the corporation is:  
331 Coral Trace Lane Delray Beach, Florida 33445  
and the name of it's initial Registered Agent at such address is:  
Dr. John G. Pierre

### **TENTH**

Address of the principal place of business is:  
331 Coral Trace Lane Delray Beach, Florida 33445

### **ELEVENTH**

The number of directors constituting the initial board of directors of the corporation is Two, and the names and address of the persons who are to serve as directors until the first annual meeting of the Shareholders or until their successors are elected and shall qualify are:

NAME

ADDRESS

\* Dr. John G. Pierre, Pres. /Treas.                      331 Coral Trace Lane Delray Beach, Florida 33445

### **TWELFTH**

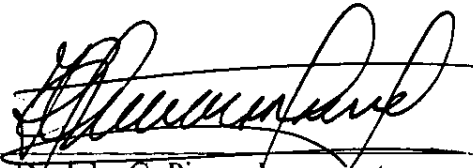
The name and address of each incorporator is:

NAME

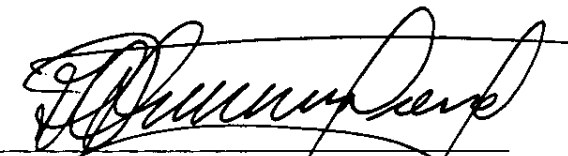
ADDRESS

\* Dr. John G. Pierre, Pres. /Treas.                      331 Coral Trace Lane Delray Beach, Florida 33445

Date: August 4, 2008

  
Dr. John G. Pierre, Incorporator

Having been named as Registered Agent and to accept services of process for the stated 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, my position as Registered Agent.

  
Dr. John G. Pierre, Registered Agent

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