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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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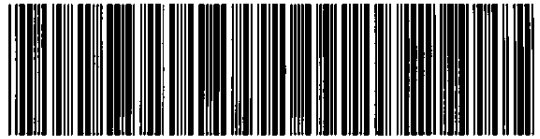
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 JUN 10 AM 11:55

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MPD
6/11

TRANSMITTAL LETTER

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

SUBJECT: wellness Awareness 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: Ronald Derocher
Name (Printed or typed)

14016 Banyan Rd.
Address

Spring Hill, FL 34609
City, State & Zip

1-352-398-4570
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:

Wellness Awareness Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14016 BANYAN RD
Spring Hill, FL. 34609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Health + Nutritional Aids

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

• Ronald Derocher Pres.
14016 BANYAN RD
Spring Hill, FL. 34609

ARTICLE VI REGISTERED AGENT

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

Ronald Derocher
14016 BANYAN RD.
Spring Hill, FL. 34609

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RONALD DEROCHER
14016 BANYAN RD
SPRING HILL, FL. 34609

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.

Ronald J. Derocher
Signature/Registered Agent/Incorporator

6/6/09
Date

Signature/Incorporator

Date

FILED

09 JUN 10 AM 11:55

SECRETARY OF STATE
TALLAHASSEE FLORIDA