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COVER LETTER

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

SUBJECT:	VITIQUEST, INC.					
Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:						
FEES:						
Articles	Certificate of Domestication \$ 50.00 Articles of Incorporation and Certified Copy \$ 78.75 Total to domesticate and file \$128.75					
OPTIONAL:						
Certifica	ate of Status \$ 8.75					
	PHILIP JOSEPHSON					
	Name (printed or typed)					
	2980 McFARLANE ROAD, SUITE 204					
	Address					
	MIAMI, FL 33133					
	City, State & Zip					
	305.443.3444					
	Daytime Telephone Number					
	PJOSEPHSON@JOSEPHSON-LAW.COM E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used for future annual report notification)						

CERTIFICATE OF DOMESTICATION

Th	e undersigned,	PHILIP JOSEPHSON ,,	GENERAL COUNSEL ,		
		(Name)	(Title)		
of		VITIQUEST, INC. (Corporation Name)	a fore	ign corporation	on,
in a	accordance with s. 6	607.1801, Florida Statutes, does hereby certi	ify:		,
1.	The date on which	corporation was first formed was	JULY 3	,2001	- ·
2.	The jurisdiction w	here the above named corporation was first	formed, incorporate	ed, or otherwi	ise
•	came into being w	/as MICHIGAN			 •
3.	The name of the co	orporation immediately prior to the filing of	this Certificate of I	Domestication	n
	was VITIQUEST,	INC.			
4.	The name of the co	orporation, as set forth in its articles of incor	poration, to be filed	d pursuant to	
	s. 607.0202 and 60	07.0401 with this certificate is			_
	VITIQUEST, INC	2.			
5.	administration of t	at constituted the seat, siege social, or princi he corporation, or any other equivalent juris e the filing of the Certificate of Domestication	diction under appli- on was		·
	to s. 607.1801.	da articles of incorporation to complete the	lomestication requi	rements purs	uant
			alf of the compositi	on and house	
		ign this Certificate of Domestication on beh	an of the corporation	2009	JUHE
SO I	this the <u>9TH</u> day o	(Authorized Signature)	·,	O9	.•
	Ar	Filing Fee: ertificate of Domestication ticles of Incorporation and Certified Cop etal to domesticate and file	\$ 50.00 \$ 78.75 \$128.75	JUN 29 PM 12: 27 GETARY OF STATE AHASSEE, FLORIDA	The second of th

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

VITIQUEST, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: 18 MAIN GROVE STREET
ST. PETERSBURG, FL 33705

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: PROFESSIONAL MEDICAL SERVICES

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 60,000

ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:
CHRISTOPHER SMITH
18 MAIN GROVE STREET
ST. PETERSBURG, FL 33705

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE <u>NAME AND FLORIDA STREET ADDRESS</u> (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS: LAW OFFICE OF PHILIP JOSEPHSON 2980 McFARLANE ROAD

SUITE 204

MIAMI, FL 33133

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

LAW OFFICE OF PHILIP JOSEPHSON

2980 McFARLANE ROAD

SUITE 204

MIAMI, FL 33133

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

Date

JUNE 9, 2009

JUNE 9, 2009

Date

Signature/Registered Agent/

Signature/Incorporator

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