POPODO WE 4031

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2009 JUL 28 PH IZ: 31
SECRETARY OF STATE
SECRETARY OF STATE

FILED

COVER LETTER

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

SUBJECT:	Designs For Wellness, Inc.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l 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 CO	PY REQUIRED		
FROM:		ny D. Helms e (Printed or typed)			
	5806 Jade Moon Circle				
	•	Address			
	Milton, FL 32583				
	City,	State & Zip			
	850-505-0660				
	Daytime T	elephone number			
		anhelms.com	notification)		
E-mail address: (to be used for future annual report notification)					

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:

Designs For Wellness, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 5806 Jade Moon Circle, Milton, FL 32583

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Health Consulting

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Danny D. Helms

5806 Jade Moon Circle, Milton, FL 32583

President, Secretary and Treasurer

ARTICLE VI REGISTERED AGENT

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

Danny D. Helms 5806 Jade Moon Circle

Milton, FL 32583

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Danny D. Helms 5806 Jade Moon Circle Milton, FL 32583

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 DANNY D. HELMS

Date

07/20/2009

Date

07/20/2009

Date

Date

SECRETARY OF STATE TALLAHASSEE, FLORID

FILED