N Ô (Requestor's Name) (Address) 800159157808 (Address) (City/State/Zip/Phone #) 08/03/09--01070--014 **78.75 PICK-UP WAIT MAIL (Business Entity Name) (Document Number) λ, Certified Copies _____ Certificates of Status Special Instructions to Filing Officer: 2009 AUG - 3 PM 1: 47 Office Use Only

5 8/4/09

COVER LETTER

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

SUBJECT:	Truly Orthopedic Everyday Shoes 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

Filing Fee & Certificate of Status

☑ \$78.75

□ \$78 .75	□ \$87.50
Filing Fee	Filing Fee
& Certified Copy	Certified
	& Certific
	Status

ling Fee, ertified Copy Certificate of atus

ADDITIONAL COPY REQUIRED

FROM:	Michael P. O'Donell	21
-	Name (Printed or typed)	SECRETA DIVISION OF
_	711 N. 3rd ST. Suite 2	JG - F
_	Address	-3 PI
	Leesburg, Florida 34748	STA JRAT
_	City, State & Zip	: 4 8
	352-267-2359	
_	Daytime Telephone number	
	mpodonell@aoi.com	
	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 UN Orthopedic Everyday Shoes Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 711 N. 3rd St. Suite 2 Leesburg, Florida 34748

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to sell and dispense custom, orthopedic and diabetic shoes.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Michael P. O'Donell

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: Michael P. O'Donell 711 N. 3rd St. Suite 2 Leesburg,Florida 34748

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Michael P. O'Donell 711 N. 3rd St. Suite 2 Leesburg,Florida 34748

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 Ager

Entru

Signature/Incorporator

07/28/2009 Date 07/28/2009 Date

FILED SECRETARY OF STATE DIVISION OF CORPORATION:

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