

Florida Department of State Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE

Account Number: I2000000146

Phone : (305) 444-4994

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FLORIDA PROFIT/NON PROFIT CORPORATION

HALCYON HERBAL SUPPLEMENTS, INC.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, P.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

HALCYON HERBAL SUPPLEMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 13060 DEVA ST...
CORAL GABLES FL 33156

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
WHOLESALE TRADE AND ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
MANUEL REMEDIOS - P/T/S

13060 DEVA ST CORAL GABLES FL 33156

ARTICLE VI REGISTERED AGENT

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

MANUEL REMEDIOS 13060 DEVA ST

CORAL GABLES FL 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MANUEL REMEDIOS

13060 DEVA ST

CORAL GABLES FL 33156

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 Date

09-02-09

Date

09-02-09

Date

Date

SECRETARY OF STATE OALL AHASSEE, FLORIDA