

PD9000094910

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : FASTKIT CORPORATE OUTFITS  
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TALLAHASSEE, FLORIDA  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
POWER HEALTH PRODUCTS, INC.

Certificate of Status	0
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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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2009 NOV 18 P 12:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF  
POWER HEALTH PRODUCTS, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida and all rights and duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

Article I

The name of the Corporation shall be:

POWER HEALTH PRODUCTS, INC.

Article II

This Corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

Article III

This Corporation may engage or transact in any and all lawful activities or business permitted under the laws of the United States, State of Florida, or any other state, country, territory, or nation.

Article IV

The aggregate number of shares which this corporation shall have authority to issue is the total of 100 shares, having an individual value of \$1.00 each, and shall be only Common class of stock of this corporation. The shares shall be issued as follows:

SUN CREST INTERNATIONAL LIMITED 100 Shares



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said act:

First-That POWER HEALTH PRODUCTS, INC. desiring to  
(name of Corporation)

organize under the laws of the State of Florida with  
its principle office as indicated in the Articles of  
Incorporation at the COUNTY OF BROWARD, State of

Florida has named MICHELLE MOHANY SINGH  
(Name of Registered Agent)

located at 7919 NW 20<sup>TH</sup> STREET City of FEMERROKE PINES,  
(Street Address and number)

COUNTY of BROWARD, State of Florida, as its  
Agent to accept service of process within this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the  
above stated corporation, at place designated in this  
certificate. I hereby accept to act in this capacity,  
and agree to comply with the provision of said Act  
relative to keeping open said office.

By: 

Signature  
Registered Agent