

P10000095205

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10/20/10--01014--005 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 NOV 19 PM 1:34

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B McKnight NOV-22-2010

COVER LETTER

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

SUBJECT: Diabetes 1on1 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
☒ \$78.75 Filing Fee
& Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Ramon L. Arce Jr.

Name (Printed or typed)

1548 SW 189th ter.

Address

Pembroke Pines, Fl. 33029

City, State & Zip

305-733-2929

Daytime Telephone number

rarce616@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 21, 2010

RAMON L ARCE JR
1548 SW 189TH TER
PEMBROKE PINES, FL 33029

SUBJECT: DIABETES 1 ON 1 INC.
Ref. Number: W10000049598

We have received your document for DIABETES 1 ON 1 INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

An effective date may be added to the Articles of Incorporation if a 2011 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6929.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 010A00024923

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

Diabetes 1on1 Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
1548 SW 189th Ter
Pembroke Pines, FL 33029

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Diabetes education.

ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ramon L. Arce Jr.
Address: 1548 SW 189th Ter
Pembroke Pines, FL 33029

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

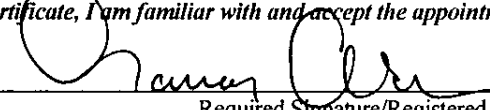
Name: Ramon L. Arce
Address: 1548 SW 189th Ter
Pembroke Pines, FL 33029

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

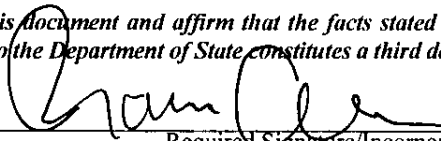
Name: Ramon L. Arce Jr.
Address: 1548 SW 189th Ter
Pembroke Pines, FL 33029

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


Required Signature/Registered Agent

11/15/10
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

11/15/10
Date

FILED
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