## P1100063559

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MA	IL.			
(Business Entity Name)	<del></del>			
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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## **COVER LETTER**

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

SUBJECT: New York Florida Healt	th Digest, Inc.
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee  & Certified Copy Certificate of Status  ADDITIONAL COPY REQUIRED
FROM: Michael Cook Name	(Printed or typed)
6698 Old Farm Trail	ddress
Boynton Beach, FL 3343	37 State & Zip
516-698-7098  Daytime Te	lephone number
yogamike 123@yahoo.cor E-mail address: (to be used	n 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)

	New York Florida He	ealth Digest, Inc.	
The name of the corp	poration shall be:		
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing a	address, if different is:
	698 Old Farm Trail		
Bo	oynton Beach, FL 33437		
ARTICLE III P			
General Busin	ich the corporation is organized is:		
Conordi Buoni	333 T 3. P3333		
ARTICLE IV S			
The number of shares	s of stock is: 200 no par value		
ARTICLE V I	NITIAL OFFICERS AND/OR DIRECT	ors	
	e:Michael Cook - President		
Address:	6698 Old Farm Trail		
	Boynton Beach, Fl. 33437		
Name and Title	e:	Name and Title:	
Address:		Address:	
		<del></del>	
Name and Title	e:	Name and Title	
Address:		Address:	
ARTICLE VI R	EGISTERED AGENT		
	ia street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Michael Cook		
Address:	6698 Old Farm Trail		
	Boynton Beach, FL 33437		
ARTICLE VII 11	VCORPORATOR		
	ss of the Incorporator is:		
Name:	Michael Cook		
Address:	_ 6698 Old Farm Trail		
	Boynton Beach, FL 33437	——————————————————————————————————————	
Having been named	us registered agent to accept service of pro-	cess for the above stated corpo	pration at the place designated in
this certificate, I am fo	amiliar with and accept the appointment as	registered agent and agree to a	ct in this capacity
m		-	
Mus	han vols		7/5///
	Required Signature/Registered Agent		Date
submit this docume	nt and affirm that the facts stated herein t	nea true I am mores that the	false information submitted in a
	nt and approximatine jacts stated nevern to riment of Statesconstitutes a third degree fel		
111		and the first indicate in most life	-1-1.
YIM	lux Cook		7/5/11
/	Required Signature/Incorporator		Date