

71200 0005580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

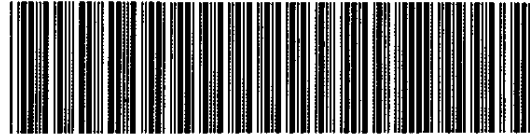
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900218229879

01/17/12--01058--020 **78.75

FILED
2012 JAN 17 AM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 18 2012
J. SHAW

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

NUTRITION FOR ALL, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be

*1986 W 60th ST.
HALEAH, FL. 33012*

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100%

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*MARICELA ESTRADA
1890 W 56th ST.
HALEAH, FL. 33012*

2012 JAN 17 AM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILE

ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

MARICELA ESTRADA.
1890 W 56th ST. APT 1303.
HIALEAH, FL. 33012

The undersigned incorporator has executed these Articles of Incorporation this
12th day of DECEMBER 20 11.


Signature


ARTICLE VI- DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

- MARICELA ESTRADA (PRESIDENT)
1890 W 56th ST. APT. 1303.
HIALEAH, FL. 33012.
- ALEXANDER DE ZARRAGA (VICE-PRESIDENT)
7897W 30th CT.
HIALEAH, FL. 33018

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.


Registered Agent Signature

2012 JAN 17 AM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED