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COVER LETTER

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

SUBJECT: GRASSROOTS AcupUNCTURE & HERbs, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:			
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED			
FROM: ANN F. GORDO	'n			
FROM: ANN E. GORDON Name (Printed or typed)				
7100 W. Camino	Real, Sute 302 Address			
BOCA RATON, FL 33433 City, State & Zip				
954-461-9669 Daytime Telephone number				
E-mail address: (to be used	l for future annual report notification)			

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



MEGEIVED 12 MAY 24 AN II: 82 4. ISLAN OF CHAPOPATIONS

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 14, 2012

ANN E GORDON 7100 W CAMINO REAL SUITE 302 BOCA RATON, FL 33433

SUBJECT: GRASSROOTS ACUPUNCTURE & HERBS, INC.

Ref. Number: W12000026671

We have received your document for GRASSROOTS ACUPUNCTURE & HERBS, 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.

Please complete Article(s) I.

Please return 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) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 812A00014284

www.sunbiz.org

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Division of Comparations DO POV 6997 Tollahassas Florida 2991

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

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ARTICLE I	NAME .	1. OuraTiere de Hei	ehs inc
The name of the cor	poration shall be: GRASSROOTS Ad	inpunctate a new	DO PINC,
ARTICLE II	PRINCIPAL OFFICE		
		Mailing ad	dress, if different is:
	Principal <u>street</u> address 7100 W. Camino Real Suite 3	302	
<u></u>	BOCA RATON, FL 33433		
	MONITE JOINS	_	
_			-
<u>ARTICLE III </u>	<u>'URPOSE</u>		
The purpose for wh	ich the corporation is organized is:		
	Acupaneture		
	SHARES es of stock is: 100		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	RS	
Name and Tit	le: ANN E. GORDON - PRESIDEN		
Address:	5220 NW 55 BLUD #107		
	COCONUT CREEK. FL 33063		
3.7 100%	•	33 - 100°d	
	le:		
Address:		Address:	
			
Name and Tit	le:	Name and Title:	
Address:			
Address.		Address.	
			
			<u></u>
	REGISTERED AGENT		\sim
	ida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	ANN E. GORDON		
Address:	5220 NW 55 BLUD # 107		No. 100 m
	COCORUT CREEK, FL 33063	<u> </u>	
ADDICE DE TITE	ANCORPORATOR		7 262
	INCORPORATOR		
ne <u>name and addi</u> Name:	ress of the Incorporator is: _Ann E. Goedon		A STATE STATE
	5220 NW 55 BLUD # 107		<u> </u>
Address:	COCORUT CREEK, FL 33063		
		_	
	d as registered agent to accept service of proce		
his certificate, I am	familiar with and accept the appointment as re	gistered agent and agree to ac	t in this capacity
()	C A la		
	Required Signature/Registered Agent		5 - 9 - 12 Date
	Required Signature/Registered Agent		Date
i culmit thic door	nent and affirm that the facts stated herein ar	o true I am aware that the t	falso information submitted in .
	partment of State constitutes a third degree felo		
······································	name of Same constitutes a man degree jeto	ny ao provinca jor in 501/.13.	79 # 06.00
()	in & Haden		r a
	K C. YIYON		5-9-12
	Required Signature/Incorporator		Date