

P 12000078596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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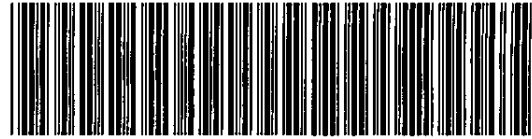
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 14 PM 2:04

9/17/12

COVER LETTER

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

SUBJECT: Four Winds Nutrition Club, 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

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Christian Domergue

Name (Printed or typed)

1645 N. Park Ave.

Address

Winter Park, FL 32789

City, State & Zip

(407) 740-8012

Daytime Telephone number

christian@webnat.com

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

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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)

ARTICLE I NAME

The name of the corporation shall be: Four Winds Nutrition Club, Inc.

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DIVISION OF CORPORATIONS

ARTICLE II PRINCIPAL OFFICE

Principal street address
1645 N. Park Ave.
Winter Park, FL 32789

Mailing address, if different is 12 SEP 11 PM 2: 04

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
any and all business including but not limited to trade and commerce.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christian Domergue, Secretary
Address: 1645 N. Park Ave.
Winter Park, FL 32789

Name and Title: _____
Address: _____

Name and Title: Kenneth Rhea, Director
Address: 1645 N Park Ave
Winter Park, FL 32789

Name and Title: _____
Address: _____

Name and Title: Charles Brennen, President
Address: 701 Crestbrook Loop Circle
Longwood, FL 32750

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: Christian Domergue
Address: 1645 N. Park Ave.
Winter Park, FL 32789

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Christian Domergue
Address: 1645 N. Park Ave
Winter Park, FL 32789

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

Christian Domergue
Required Signature/Registered Agent

09-12-12
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.

Christian Domergue
Required Signature/Incorporator

09-12-12
Date