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FLORIDA PROFIT/NON PROFIT CORPORATION ALL NATURAL PRODUCT CORP

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July 12, 2013

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FLORIDIA DEPARTMENT OF STATE
Division of Corporations

SUBJECT: ALL NATURAL PRODUCTS CORP

REF: W13000039354

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Tim Burch Regulatory Specialist II New Filing Section FAX Aud. #: E13000155941 Letter Number: 713A00017051

P.O BOX 6327 - Tallahassee, Florida 32314

£ 05/23/2031 23:35 Florida Department of State Attention: New Filings Section To whom it may concern: This is to advise you that the owners of ALL NATURAL Product are the same owners of the attached of Doc# articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.

Very sincerely,

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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:

ALL NATURAL PRODUCT

ARTICLE II - PRINCIPAL OFFICE

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

345 SW 9 OVE N

Miami FL 33130

ARTICLE III - SHARES

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

CLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Francisca Reinoso

345 SW 9 AVE. N. Miami FL 33130

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ARTICLE V - INCORPORATOR

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

Francisca Rein

Miami FL 33

The undersigned incorporator has executed these Articles of Incorporation this

ARTICLE VI- DIRECTOR (S)

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

rancisca Reinoso

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

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