

P/4000032197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

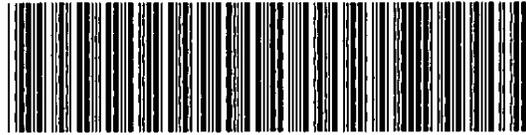
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100258663921

04/11/14--01001--002 \*\*87.50

2014 APR 10 PM 3:50  
SUFFICIENCY OF FILING

2014 APR 10 PM 3:50

2014 APR 10 PM 4:05  
STATE OF FLORIDA

2014 APR 10 PM 4:05

APPROVED  
AND  
FILED

*W* 04/10/14

**COVER LETTER**

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

SUBJECT:

Get Better, 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: Jamaal Holt  
Name (Printed or typed)

550 Ponderosa Circle  
Address

Midway, Fl 32343  
City, State & Zip

850-766-2541  
Daytime Telephone number

teamgetbetterinc@gmail.com  
E-mail address: (to be used 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)

**ARTICLE I NAME**

The name of the corporation shall be: Team Get Better Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

550 Ponderosa Circle

Midway, FL 32343

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful businesses

14 APR 10 PM 4:05  
STATE OF FLORIDA

APPROVED AND FILED

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Jamaal Holt Chairman/CEO/President

Address: 550 Pondeosa Circle  
Midway, fl 32343

Name and Title: Tony Alexander CFO

Address: 850 Capital Walk Drive Apt. 4309  
Tallahassee, FL 32303

Name and Title: [Redacted]

Address: [Redacted]

Name and Title: Andrew Moten - VP

Address: 312 Perlins Street  
Tallahassee, FL 32301

Name and Title: [Redacted]

Address: [Redacted]

Name and Title: [Redacted]

Address: [Redacted]

(cont.)

Name and Title: Rodney Lewis - VP Name and Title: \_\_\_\_\_  
 Address: 854 Carolina Road South Address: \_\_\_\_\_  
Quincy, FI 32351 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Jamaal Holt  
 Address: 550 Ponderosa Circle  
Midway, FI 32343

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jamaal Holt  
 Address: 550 Ponderosa Circle  
Midway, FI 32343

APPROVED AND FILED  
 14 APR 10 PM 4:05  
 SECRETARY OF STATE  
 FLORIDA

*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*

\_\_\_\_\_  
 Required Signature/Registered Agent 4/10/2014  
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.*

\_\_\_\_\_  
 Required Signature/Incorporator 4/10/2014  
Date