

P14000049321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

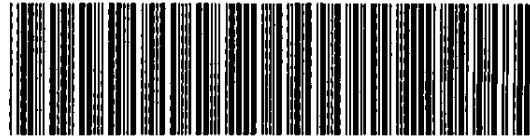
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400260732924

06/04/14--01010--003 **70.00

FILED
14 JUN -4 AM 7:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

g 6/10/14

COVER LETTER

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

SUBJECT: **Nutricentre, 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: **Bennett L. Winston**

Name (Printed or typed)

7831 Sheridan St.

Address

Hollywood, FL 33024-2535

City, State & Zip

(954)966-2315

Daytime Telephone number

Musicman123@juno.com

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

FILED
14 JUN -6 AM 7:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Nutricentre, Inc.

FILED

ARTICLE II PRINCIPAL OFFICE

Principal street address

7831 Sheridan St.

Hollywood, FL 33024-2535

14 JUN -4 AM 7: 42
Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To buy and sell products from Peru, S.A.

ARTICLE IV SHARES

The number of shares of stock is: 2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Bennett L. Winston (President)

Address 7831 Sheridan St.
Hollywood, FL 33024-2535

Name and Title: Sara Rachel Winston (Vice President)

Address: 7831 Sheridan St.
Hollywood, FL 33024-2535

Name and Title: Victor Winston (Director of Ops.)

Address 7831 Sheridan St.
Hollywood, FL 33024-2535

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Bennett L. Winston
Address: 7831 Sheridan St.
Hollywood, FL 33024-2535

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Bennett L. Winston
Address: 7831 Sheridan St.
Hollywood, FL 33024-2535

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

Bennett L. Winston

Required Signature/Registered Agent

5-31-14

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.

Bennett L. Winston

Required Signature/Incorporator

5-31-14

Date

FILED
14 JUN -4 AM 7:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA