

P/500003820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 15 2015

S. GILBERT

COVER LETTER

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

SUBJECT: _____

HE 2 WE 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: _____

CARL A. SHEERIN

Name (Printed or typed)

153 WATERFORD - G

Address

DELRAY BEACH, FL. 33446

City, State & Zip

561-706-7722

Daytime Telephone number

BUYERMANDATE@LIVE.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: HE 2 WE INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

153 WATERFORD - G
DELRAY BEACH, FL.
33446

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: HEALTH TO WELLNESS
PRODUCTS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CARL A. SNEERIN

Name and Title: PRESIDENT

Address: 153 WATERFORD - G

Address: _____

DELRAY BEACH, FL.
33446

Name and Title: DAVID M. PECK

Name and Title: VICE PRESIDENT

Address: 153 WATERFORD - G

Address: _____

DELRAY BEACH, FL.
33446

Name and Title: CARL A. SNEERIN

Name and Title: TREASURER

Address: 153 WATERFORD - G

Address: _____

DELRAY BEACH, FL.
33446

(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:

Address:

CARL A. SHEERIN
153 WATERFORD-G
DELRAY BEACH, FL. 33446

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Address:

CARL A. SHEERIN
153 WATERFORD-G
DELRAY BEACH FL 33446

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

Carl A. Sheerin
Required Signature/Registered Agent

1/7/2015
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.

Carl A. Sheerin
Required Signature/Incorporator

1/7/2015
Date