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(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
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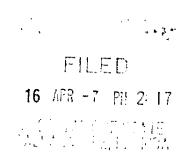
4/8/14

## **COVER LETTER**

Department of State New Filing Section Division of Corpora P. O. Box 6327 Tallahassee, FL 323	tions Ref. #  814  Wellness Matters	w16000015078 Consulting		<del>4</del>		
<del></del>	(PROPOSED CORPORAT	E NAME – <u>MUST INCLU</u>	DE SUFFIX)			
Enclosed are an orig	rinal and one (1) copy of the artic	es of incorporation and	a check for:			
	\$78.75 Filing Fee & Certificate of Status  by Funds (Check) *78.75	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED			
already submitted Ref. #						
<b>₩ I(, 6000</b> 0 t	5078 è per letter Tammie è William Name (					
		- Esther St.  dress	6 AR 1			
	Orland City, Si	o FL. 32806 ate & Zip	7 T T T T T T T T T T T T T T T T T T T	<b>う</b> ジージ		
	Daytime Tele	tel -00+1				
	Tammielebellse E-mail address: (to be used f		The l'is a lowe	er case L)		

NOTE: Please provide the original and one copy of the articles.





March 1, 2016

TAMMIE LANGE 1215 E. ESTHER STREET ORLANDO, FL 32806

SUBJECT: WELLNESS MATTERS INC

Ref. Number: W16000015078

We have received your document for WELLNESS MATTERS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the non profit corporation is being organized.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 816A00004241

## 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: Wellness Matters Consult AR<u>TICLE II PRINCIPAL OFFICE</u> Principal street address Mailing address, if different is: 1215 E. Esther Street Orlando FL. 32806 ARTICLE III PURPOSE
The purpose for which the corporation is organized is: To perform health and fitness services. ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Tammie Lange . President/Secretar Name and Title: William Lange - Vice President /Treasurer 1215 E. Esther Street Address: 1215 E. Eother Street Orlando FL. 32806 Orlando, FL. 32806 Name and Title: Name and Title: Address \_\_\_\_ Address: Name and Title:\_\_\_\_\_\_Name and Title:\_\_\_\_\_ Address Address:

Name an	d Title:	Name and Title:	·
Address		Address:	<u></u>
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	Tammie Lange	_	
Address:	1215 E. Esther Street	_	
	1215 E. Esther Street Orlando, FL. 32806	_	<i>i</i>
ARTICLE VII	<u>INCORPORATOR</u>		APR T
The name and ad	Idress of the Incorporator is:		2 5
Name:	William Lange	_	E D
Address:	1215 E. Esther Street	<u></u>	D 2: 17
	Orlando, FL. 32806	-	•
Effective date, if	EFFECTIVE DATE: other than the date of filing: tell - 16 ate is listed, the date must be specific and cannot ling.)		prior or 90 business
	inserted in this block does not meet the applicable ffective date on the Department of State's records.	statutory filing requirements, this d	ate will not be listed as
	ned as registered agent to accept service of process am familiar with and accept the appointment as re		
Vammu	y tang		3-28-16
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felor		ormation submitted in a
1,1.	Mrun Low		3-28-16
Requi	red Signature/incorporator		Date