Pn000033912

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Otty/Otate/Zip/: Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
, ,





300297678003

04/11/17--01011--015 **128.75

APR 1 3 2017

T SCHROEDER

COVER LETTER

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

SUBJECT:	ATHLETIC ED	OGE NUTRITION, INC.
Enclosed is a	n original and one (1) copy	of the Certificate of Domestication and a check for:
FEES:		
Artick	icate of Domestication es of Incorporation and Cert to domesticate and file	\$ 50.00 tified Copy <u>\$ 78.75</u> \$128.75
<u>OPTIONAL:</u>	<u>:</u>	
Certifi	icate of Status	\$ 8.75
		ame (printed or typed)
	 -	Address
		City, State & Zip
	Day	time Telephone Number

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

CERTIFICATE OF DOMESTICATION

The undersigne	ed SEBASTIAN BALCOMBE	DIRECTOR			
	(Name)	(l'itle)			
of Athletic E	dge Nutrition, Inc. $\mp 11-387$	a foreign corporation.			
in accordance v	(Corporation Name) with s. 607.1801, Florida Statutes, does hereb	y certify:			
1. The date or	which corporation was first formed was Ap	ril 15 <u>2017</u> .			
	ction where the above named corporation was being was Nevada	first formed, incorporated, or otherwise			
	of the corporation immediately prior to the filitic Edge Nutrition, Inc.	ng of this Certificate of Domestication			
4. The name of	The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to				
s. 607.0202	and 607.0401 with this certificate is Athleti	c Edge Nutrition, Inc.			
administrati	ction that constituted the seat, siege social, or ion of the corporation, or any other equivalency before the filing of the Certificate of Domes	jurisdiction under applicable law.			
6. Attached ar to s. 607.18	re Florida articles of incorporation to complete (01).	the domestication requirements pursuant			
Tam Director	Athletic Edge Nutrition,	Inc.			
	zed to sign this Certificate of Domestication o day of <mark>April</mark>	n behalf of the corporation and have done 2017			
	(Authorized Signatu	re)			
	Filing Fee:				
	Certificate of Domestication Articles of Incorporation and Certified	\$ 50.00 I Copy <u>\$ 78</u> .75			
	Total to domesticate and file	\$128.75			

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Athletic Edge Nutrition, Inc.	
ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS: Principal Address	Mailing Address
1200 Holland Drive	1200 Holland Drive
Unit #207	Unit #207
Boca Raton, FL 33487	Boca Raton, FL 33487
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZA All lawful purposes.	ED:
	· · · · · · · · · · · · · · · · · · ·

Title/Name	Title/Name
Director, Sebastian Balcombe	
1200 Holland Drive, Unit # 207	
Boca Raton, FL 33487	
Title/Name	Title/Name
Title/Name	Title/Name
Title/Name	Title/Name

ARTICLE IV SHARES
THE NUMBER OF SHARES OF STOCK IS: 10,000

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCE	
Eric J. Evilsizer, Esq.	
2659 East Gulf to Lake Highway, #305	
Inverness, Florida 33453	
ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS:	
Sebastian Balcombe	
1200 Holland Drive, Unit # 2072	
Boca Raton, FL 33487	
**********************	·***************
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEP STATED CORPORATION AT THE PLACE DESIGNATED IN THIS C ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGR	T SERVICE OF PROCESS FOR THE ABOVE ERTIFICATE, I AM FAMILIAR WITH AND
TOUR THE APPOINTMENT AS REGISTERED AGENT AND AGRI	7/3//7
Signature/Registered Agent	Date
Sebastian Balcombe	4/14/2017
Signature/Incorporator	Date