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e print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone

: (305)552-5973 : (305)675-5944

Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION J&Y HEALTHYFOOD CORP.

Certificate of Status	0
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Estimated Charge	\$78.75

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

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JEY HEALTHY FOOD COND.		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:		
-12039 AW. 132 COOPT MUT!		
MAMI-FL 33/86		
ARTICLE III SHARES: The number of shares of stock is:	<b>-</b> ·	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
JOSE ANTONIO GARCIA (P)		
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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	N	
The name and Florida street address (PO Box not acceptable) of the registered agent is:  Tose ANTONIO CARCIA		
12039 fw. 132 BONT UNIT!		
MMMi - FL 33186		
ADTIOLD		
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:		
JOSE ANTONIO GARCÍN 12039 AN 132 COUNT-		
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MAMI - FC. 33186.		

## Required Signatures:

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
Registered Agent 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.

HH)

ncorporator

Date

TALLAHASSEE FOR ALLAHASSEE

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