

PI9000039867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

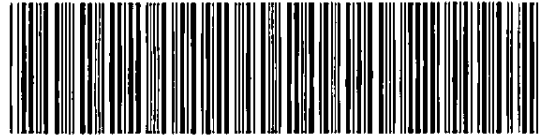
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2019 MAY 13 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 14 2019

K Brumbley

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP:

5/13 Almeida

☐ CERTIFIED COPY

☒ PHOTOCOPY

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☒ FILING

Inc.

1. BioHealth Labs, Inc.
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

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

SUBJECT: BioHEALTH LABS, 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: Yulissa Sanchez
Name (Printed or typed)

17121 NW 86th ave
Address

Hialeah, FL 33015
City, State & Zip

786 239 1431 / 954-278-4286
Daytime Telephone number

yulissasan0457@gmail.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: BIOHEALTH LABS, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

17121 NW 86TH AVE

HALEAH, FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YUSSA SANCHEZ - P Name and Title: _____

Address: 17121 NW 86TH AVE Address: _____

HALEAH, FL 33015

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

2019 MAY 13 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

(cont.)

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:

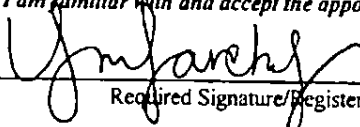
Name: YULISSA SANCHEZ
Address: 17121 NW 86TH AVE
HIALLAH, FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

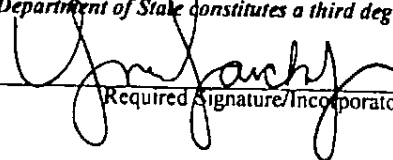
Name: YULISSA SANCHEZ
Address: 17121 NW 86TH AVE
HIALLAH, FL 33015

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


Required Signature/Registered Agent

5-13-19
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.


Required Signature/Incorporator

5-13-19
Date