

P22000008493

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

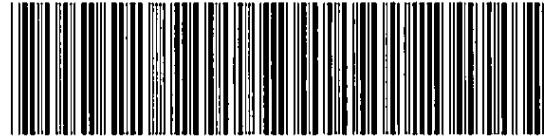
(Business Entity Name)

(Document Number)

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ALLAHASSEE, FL 32001

2022 FEB -4 AM 11:31

RECEIVED

2022 FEB -4 PM 3:05

FILED
SECRETARY OF STATE
DEPT. OF CORPORATION

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 434029 8368967

AUTHORIZATION :



COST LIMIT : \$70.00

ORDER DATE : January 25, 2022

ORDER TIME : 10:06 AM

ORDER NO. : 434029-005

CUSTOMER NO: 8368967

DOMESTIC FILING

NAME: NEW HOLISTICA INC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2022

CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: NEW HOLISTICA INC
Ref. Number: W22000012303

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

Verify the address in Article II. the city.

Please return 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.

Neysa Culligan
Regulatory Specialist III

Letter Number: 622A00002853

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DIVISION OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: NEW HOLISTICA INC

2022 FEB -4 PM 3:05

ARTICLE II PRINCIPAL OFFICE

Principal street address
19611 Tequesta St

Mailing address, if different is:

Summerland Key , Florida 33042

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WE ARE A HOLISTIC AND INTEGRATIVE ONLINE MEDICAL CLINIC FOCUSING IN A RANGE OF
TREATMENTS TO HELP WITH HORMONAL, AUTOIMMUNE, DIGESTIVE, AND GENERAL
HEALTH RELATED ISSUES.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John Reynolds, Director

Name and Title: _____

Address Studio One Condos Av. CTM 20

Address: _____

Mz 159 Lt 2 Departamento 40ZAZIL HA, PLAYA DEL

CARMEN,7, SOLIDARIDAD,QUINTANA ROO 77720
Mexico

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Corporation Service Company
Address: 1201 Hays Street
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: John Reynolds
Address: Studio One Condos Av. CTM 20
Mz 159 Lt 2 Departamento 40ZAZIL HA, I
CARMEN.7, SOLIDARIDAD, QUINTANA ROO 77720
Mexico

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Eyleina Bahar
Assistant Vice President

Required Signature/Registered Agent

02/04/2022

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.

John Reynolds

Required Signature/Incorporator

02-04-2022

Date

FILED
SECRETARY OF STATE
DEPARTMENT OF CORPORATIONS
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