P95000020899

TRANSMITTAL LETTER

WELLNESS BY DESIGN, INC.

(Proposed corporate name - must include suffix)

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

SUBJECT:

			-03/1	0001 428936 14/9501078003 +78.75 *****78.75
	ginal and one (1) co	py of the articles o	of incorporation	and a check
for : \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate by Required	
FRA	M: DANE	Sutton (printed or typed)		,
Quare TO PHONE TO	5734	<u> </u>	TERRACE	
OLONE TO STHORIZATION BY PHONE TO CORRECT 3115195	- - FI	Address Audellate,	FL 33308	
	Cit	y, State & Zip	- 0	
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B. REGISTER MI	Lq1, 160, 67 1			FILED NAR 13 AH 9: 01 RETARY OF STATE AHASSEE FLORID

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

ARTICLES OF INCORPORATION CORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

WELLNESS BY DESIGN, FNC

ARTICLE II PRINCIPAL OFFICE

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

STANE SULTON 5734 NE 18th Tenace F+ Lauderdale, FL 33308

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

DIANE SUTTON 5734 NE 18th Pensee F4-Lauderdale, FL 33308

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

4th day of March 1995

Signature

Signature -

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: WEUNESS BY DESIGN	, INC.
2.	The name and address of the registered agent and office is:	95 IMR 13 SECRETARY I
	5734 NE 18th TERRACE	M 9: OC
	(P.O. Box or Mail Drop Box NOT acceptable)	75
	H LAUDERDALE, PL 33308	
	(City/State/Zip)	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature) 3-9-95 (Date)