

P 960000 38792
Change Number Only

5/2/96 MNGGY

Requester's Name
BRUCE CROWN
Address
15490 NW 7 AVE #205
MIAMI FL 33169
City State ZIP Phone

687-3900B

VALIDATION ONLY

FILED
96 MAY -6 PM 1:50
TALLAHASSEE, FLORIDA

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****122.50 ****122.50

CORPORATION(S) NAME

GLOBAL Health Distributors INC.

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input checked="" type="checkbox"/> Walk In | | <input type="checkbox"/> After 4:30 |
| | | <input type="checkbox"/> Mail Out |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

F. CHESSEY MAY 6 1996
CERTIFIED COPY

Empire Toll Free: 1-800-432-3028

ARTICLES OF INCORPORATION

ARTICLE I

1. The name of this corporation is GLOBAL HEALTH DISTRIBUTORS INC.

ARTICLE II

2. This corporation is organized for the purpose of transacting any and all lawful business in the State of Florida.

ARTICLE III

3. This corporation shall have perpetual existence.

ARTICLE IV

4. This corporation is authorized to issue ten (10) shares; no par value.

ARTICLE V

5. The street address of the initial registered office of this corporation is:

15490 NW 7th Avenue
Miami, FLorida 33169

and the initial registered agent of this corporation is
BRUCE N. CROWN, ESQUIRE.

This Instrument Prepared By:
BRUCE N. CROWN, ESQ.
15490 NW 7th Ave., Ste. 205
Miami, FL 33169
305-687-3900

FILED
96 MAY -6 PM 1:50
CLERK OF DISTRICT COURT
STATE OF FLORIDA
TALLAHASSEE

ARTICLE VI

6. The principal place of business of this corporation is:

3600 NW 84th Terrace
Coral Springs, Florida 33165

ARTICLE VII

7. This corporation shall have one (1) director initially. The number of directors may be increased from time to time by the bylaws, but shall never be less than one (1). The name and addresses of the initial directors of this corporation are as follows:

JEFF COHEN, President
3600 NW 84th Terrace
Coral Springs, FL 33065

ARTICLE VIII

8. The name and post office address of each subscriber of these Articles of Incorporation, and a statement of the number of shares which each agrees to take is as follows:

NAME	ADDRESS	# OF SHARES	VALUE
JEFF COHEN	3600 NW 84th Terrace Coral Springs, FL 33065	10	-0-

The provisions of the Charter, and each and every article and section thereof, and bylaws of this corporation shall be a part of every contract and transaction to which this corporation shall be a party. Every person, association and/or corporation dealing with this corporation is hereby charged with notice and knowledge of this corporation.

IN WITNESS WHEREFORE, I have herunto set my hand and
seal this May 2, day of 1996.

Jeff Cohen
President

STATE OF FLORIDA)
COUNTY OF DADE)

BEFORE ME, the undersigned authority personally
appeared JEFF COHEN to me known to be the person described
in and who executed and subscribed to the foregoing Articles
of Incorporation and they acknowledged before me that they
executed the same and subscribed to the same for the purpose
therein expressed.

WITNESS, my hand and seal at Miami, Dade County,
Florida on this 2nd day of May 1996.

Notary Public at Large.

My Commission Expires:



MARGUERITE DIMATTEO
My Comm Exp. 1/22/00
Bonded By Service Ins
No. CC526156
☐ Personally Known ☐ Other I. D.

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95 MAY -6 PM 1:50

TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING PLACE OF DOMICILE FOR SERVICE OF PROCESS
WITHIN THIS STATE NAMING AGENT WHOM MAY BE SERVED.**

In pursuance of Chapter 48.091, Florida Statutes,
the following is submitted in compliance with said act.

FIRST AND THAT GLOBAL HEALTH DISTRIBUTORS INC.,

Desiring to organize under the laws of the State of
Florida with its principal office, as indicated in the Articles
of Incorporation, at City of Miami, County of Dade, State of
Florida, has named **BRUCE N. CROWN, ESQUIRE**, located at 15490
NW 7th Avenue, Suite 205, Miami, Florida 33169, as its agent
to accept Service of Process within the State of Florida.

ACKNOWLEDGMENT: (MUST BE SIGNED BY RESIDENT AGENT)

Having been named to accept Service of Process for
the above-styled corporation at place designated in this
Certificate, I hereby accept to act in this capacity, and agree
to comply with the provisions of said Act relative to keeping
open said office.


BRUCE N. CROWN, ESQUIRE
Registered Agent