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Department of State Division of Corporations P.O. Box 6327				(State 10 00 1 (State 11 55 - (05/14/050103400 まかみれたとよっちり ・キャキル125				
	o, FL 32314							දුරු
SUBJECT:	wellnes		CSSCO	porate name	Inc		96 AUS 14	THE STATE OF THE S
Enclosed li 9 '조드	s an original and	d one (1)	copy of t	the articles	of incorp	oration and	a chao	* formula
FROM:	Ecia	<u> کیرې</u>	ો દ ' (ed or typed)	:- 		_	
	303	Plac	nostration Addi		<u> </u>	<u></u>	<u> </u>	
	Golf Br	<u>१८३८</u>	City, Stat	3256 10, & Zip	<u>, (</u>		<u> </u>	
	904-	934	-1648	Number				

55/16 malo. 16486

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

ARTICLES OF INCORPORATION

OF

wellness Essentials Inc

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 | NAME

The name of the corporation shall be: wellness Essentials, In a

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

303 Plantation Hill P.D. bult Breeze, Fl. 32561

ARTICLE JII SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Erin Currer 303 Plantation Hill RD. Lulf Breeze, Fl 32561

ARTICLE V INCORPORATORISI

The name(s) and street address(es) of the incorporator(s) to these Articles of incorporati	on
is(aro): Erin Currier, OC	
Gerald Chernekoff, D.C.	
303 Plantalim Hill RD	
Usif Breeze, F.Q. 32561	
·	
•	
The undersigned incorporator(s) has(have) executed these Articles of incorporation ti	nis
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Signature	
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Signature	
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Signature	,

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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: Levilness Essentials Troc
2.	The name and address of the registered agent and office is:
	Esta Cuttier (Namo) = 5
	303 Plantation Hill PD (P.O. Box NOT accaptable)
	15-01 + Bleeze El 325101 =
	(City/State/Zip)
St 85	aving been named as registered agent and to accept service of process for the above atted corporation at the place designated in this certificate, I hereby accept the appointment is registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.
	SIGNATURE Eni Curia 100
	DATE _ 8 - 6 - 96

REGISTERED AGENT FILING FEE: \$35.00