

P96000097291

Articles of Incorporation

FILED  
56 NOV 25 AM 9:40  
TALLAHASSEE, FLORIDA

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

500002014135--9  
-11/26/96--01082--010  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: Shekinah Nutrition, Inc.  
(Proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for  
\$ 70.00

FROM:  
Name (Printed or typed) Robert N. Bedford  
Address PO Box 48295  
City, State & Zip St Petersburg FL 33743  
Telephone 813-328-2956

12/3/96  
AB

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

**ARTICLES OF INCORPORATION OF  
SHEKINAH NUTRITION, INC.**

The undersigned, acting as incorporator(s) of a corporation pursuant to Chapter 607, Florida Statutes, adopt(s) the following Articles of Incorporation.:

**ARTICLE I - NAME**

Name of Corporation  
Shekinah Nutrition, Inc.

**ARTICLE II - REGISTERED OFFICE AND AGENT**

Name and Address of Resident Agent  
Dwight Havener, 50 - 154<sup>th</sup>, Madeira Beach, Florida 33708  
Street Address of Principal Office  
50 - 154<sup>th</sup> Avenue, Madeira Beach, Florida 33708

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**ARTICLE III - AUTHORIZED SHARE**

Number of shares: 10,000 common  
If there is more than one class of shares, shares with rights and preferences, list such information on "Exhibit A."

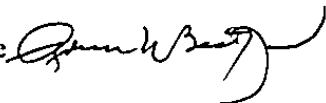
**ARTICLE IV - INCORPORATORS**

The name(s) and Address(es) of the incorporator(s) of the corporation:

NAME	NUMBER AND STREET	CITY	STATE	ZIP CODE
Robert Bedford	PO Box 48295	St Petersburg	FL	33743

In Witness Whereof, the undersigned being all the incorporators of said corporation execute these Articles of Incorporation and verify, subject to penalties of perjury, that the statements contained herein are true this 14<sup>th</sup> day of Nov, 1996.

Signature



Printed Name

Robert N. Bedford

Signature

Printed Name

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, 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: Shekinah Nutrition, Inc.

2. The name and address of the registered agent and office is:

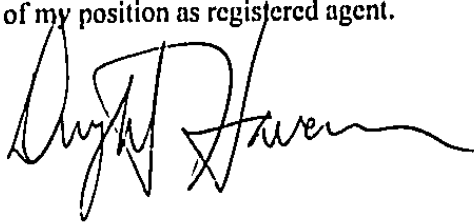
(Name) Dwight Havener

(P.O. Box NOT Acceptable) 50 - 154<sup>th</sup> Avenue

(City/State/Zip) Madeira Beach, Florida 33708

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:



DATE:

REGISTERED AGENT FILING FEE: \$35.00

Division of Corporations, PO Box 6327, Tallahassee, FL 32314

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