P960009729

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

SUBJECT:

Shekinah Nutrition, Inc.

(Proposed corporate name)

500002014135--9 -11/26/96--01082--010

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

4/8/6<sub>0</sub>

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 - 154th, Madeira Beach, Florida 33708
Street Address of Principal Office
50 - 154th Avenue, Madeira Beach, Florida 33708

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### ARTICLE III - AUTHORIZED SHARES

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 Addresses) 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 1996.

Signature Sem Wast

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 - 154th 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