TRANSMITTAL LEMMAY 15 PM 1: 22

TALLAHASSEE, FLORIDA

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

SUBJECT:JOY	OF NOURISHM	ENT, INC.	<u></u>	
	roposed corporate n	name - must include suffix)	-0	021:312034 5/16/9701049002 ***122.50 ****122.50
Enclosed is an original for: \$70.00 Filing Fee	and one (1) co \$78.75 Filing Fee & Certificate	X \$122.50 [\$131.25 Filing Fee, Certified Copy & Certificate	nd a check
FROM:		B. EGGLER (printed or typed)		
	2919 FT. L	2919 EAST COMMERCIAL BLVD. STE Address FT. LAUDERDALE, FL. 33308 City, State & Zip (954) 928-0707		4
	Daytime	Daytime Telephone number		

OH

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

ARTICLES OF INCORPORATION

FILED

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

ARTICLEI NAME

The name of the corporation shall be:

JOY OF NOURISHMENT, INC.

ARTICLE II PRINCIPAL OFFICE

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

2919 EAST COMMERCIAL BLVD. STE A FT. LAUDERDALE, FL. 33308

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:

NANCY B. EGGLER 7035 W. 10th CT. HIALEAH, FL. 33014

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

NANCY B. EGGLER 7035 W. 10th CT HIALEAH, FL. 33014 JON P. EGGLER 7035 W. 10th CT. HIALEAH, FL. 33014

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

_*__/3__* day of

(An additional article must be added if an effective date is requested.)

Signature

//1

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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:	JOY OF	NOURISHMENT,	INC.			_
2.	The name and address of the registe	ered agent	and office is:		TALL	971	-
	NANCY		Alixsse	7 HAY 16	B 71 H		
		V. 10th x or Mail Dro	CT. pBox <u>NOT</u> ACCEPTAB	ILE)	PH 1: 23		
	HIALEA	AH, FL.	33014 State/Zip)		DA	ယ	

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.

Manay B. Esples 5-13-97 (DATE)