

P980000/4339

Articles of Incorporation

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 FEB 12 PM 4:03

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

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-02/12/98--01023--001

*****70.00 *****70.00

SUBJECT: Healthy Impact, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for
\$ 70

FROM:
Name Healthy Impact, Inc
Address: 1260 SW Dyer Point Rd.
City, State & Zip: Palm City, Florida 34990
Telephone: 813-550-0641

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

D. BROWN FEB 12 1998

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ARTICLES OF INCORPORATION OF

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: Healthy Impact, Inc.

ARTICLE II - REGISTERED OFFICE AND AGENT

Name and Address of Resident Agent: Ronald C. Keeling, CPA
25 Second Street N., Suite 203
Street Address of Principal Office : 1260 SW Dyer Point Road
Palm City, Fl 34990

ARTICLE III - AUTHORIZED SHARES

Number of shares: 1000

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
Ronald C. Keeling	25 Second Street N, Suite 203	St. Petersburg	Florida	33701

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 5 day of February 1998

Signature Ronald C. Keeling

Printed Name Ronald C. Keeling

Signature

Printed Name

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: Healthy Impact, Inc.
2. The name and address of the registered agent and office is:

(Name) Ronald C. Keeling, CPA

(P.O. Box NOT Acceptable): 25 Second Street North, Suite 203

(City/State/Zip): St. Petersburg, FL 33701

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: 2/5/98

REGISTERED AGENT FILING FEE: \$35.00

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

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