P980000230

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

SUBJECT: CORPORATE VITAMIN Services INC. (Proposed corporate name - must include suffix)		
900024441595 -03/02/9801089008 *****78.75 *****78.75		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :		
□ \$70.00 □ \$78.75 Filing Fee Filing Fee & Filing Fee, & Certificate & Certified Copy & Certificate		
ADDITIONAL COPY REQUIRED		
FROM: Rodney Frank IRWIN Name (Printed or typed) 19540 SW 320 ST Address Homestead FIA 33030 City, State & Zip		
Daytime Telephone number Redney Credin GAVE NUTHORIZATION BY PHONE TO CORRECT Calcele I - add Inc. as corp suffix DATE 3/3- DOC. EXAM BB		

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forms Business Corporation Act, hereby adopts the following		
ARTICLE I NAME	ASS 2	
The name of the corporation shall be:		
Corporate VITAMIN	Services IIIC, 2000	
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:		
	-	
19540 Sw 320 ST.	Homestead FlA. 33030	
ARTICLE III SHARES		
The number of shares of stock that this corporation	n is authorized to have outstanding at any one time is:	
100		
,	· · · · · ·	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:		
De la companie and Provida succe address of the initial P	19540 SW 320 ST	
Rodney Frank Irwin	Homestead FTA. 33030	
	Homestead MA. >3030	
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:		
Rodney Frank Irwin	19540 SW. 320 ST	
-	Homesterd FlA. 33030	
lodney (Jauin	alamlan	
Godney (Mun	2/27/98	
Signature/Incorporator	Date	

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

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/Registered Agent

Date