## P98000024918

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

ord tect.	ALLERGY	FREE	CORPORATION
SUBJECT	<i></i>		CC

(Proposed corporate name - must include suffix)

200002457942--5 -03/16/98--01054--020 \*\*\*\*131.25 \*\*\*\*131.25

Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$131.25 □\$122.50 **\$78.75** \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee Certified Copy & Certified Copy & Certificate & Certificate ADDITIONAL COPY REQUIRED FROM: KATHLEEN Name (Printed or typed)

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

ne 3/17/98

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## ARTICLES OF INCORPORATION

SECRETARY OF STATE The undersigned incorporator, for the purpose of forming a corporation under the Florida TALLAHASSEE, FLORIDA Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

## Allergy Free Corporation

<u> ARTICLE II PRINCIPAL OFFICE</u>

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

7100-39 Fairway Drive, #210E Palm Beach Gardens, FI 33418

**SHARES** ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Hundred (100) with a par value of \$1.00

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Philip W. Milton 55 Windsor Lane Palm Beach Gardens, Fl 33418

INCORPORATOR ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

Kathleen B. Milton 55 Windsor Lane Palm Beach Gardens, FL 33418

Signature/Incorporator

(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 hefeby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all fatutes, relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of the position as

Signature/Registered Agent