TRANSMITTAL LETTER

# P9800056747

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

SUBJECT: Xavier Health Foods, Inc. (Proposed corporate name - must include suffix)				
Enclosed is an original	and one(1) copy of the articles	<i>'V</i>	00002569 -06/23/980 *****78.75 heck for :	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	MD \$131.25 Filing Fee, Certified Copy & Certificate	
FROM: Mary D. Davis				FILED FILED AM 8: 04
Address  Jax, FL 32205  City, State & Zip				
(904) 786-5973  Daytime Telephone number				

F. CHESSER JUN 2 5 1998

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

# ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Bu Corporation Act, hereby adopts the following Articles of Incorporation.

# ARTICLE I

Name

The name of the corporation shall be Xavier Health Foods, Inc.

# ARTICLE II

Principal Office

The principal place of business and mailing address of this corporation shall be 5808-4 Normandy Blvd., Jacksonville, FL 32205.

# ARTICLE III

Shares

The maximum number of shares of stock that the Corporation is authorized to have outstanding at any time is one thousand (1000) shares having no par value per share, all of which shall be common stock..

# ARTICLE IV

Registered Agent and Street Address

The address of the office of the registered agent of this corporation is Mary D. Davis. The address is 5808-4 Normandy Boulevard Jacksonville, Florida 32205

### ARTICLE V

Directors

The number of Directors of the Corporation is one (1).

The name and address of the director of this corporation is Mary D. Davis, 5808-4 Normandy Boulevard, Jacksonville, Florida 32205.

# ARTICLE VI

Incorporator

The name, address, and age of the incorporator of this corporation is Mary D. Davis, 5808-4 Normandy Boulevard, Jacksonville, Florida 32205, county of Duval, age 35 years.

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