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SECRETARY OF STATE FALLAHASSEE, FLORIDA

Date 600002583286--0 -07/08/98--01082--001 Secretary of State Division of Corporations \*\*\*\*\*70.00 \*\*\*\*\*70.00 P.O. Box 6327 Tallahassee, FL 32314 Gentlemen: Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$70.00. This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation. Very truly yours, MAILING ADDRESS OF CORPORATION -DOC. WAM PHONE JUL - 9 1998 (407) 3

Area Code

p Hall

Number

Ext.

# ARTICLES OF INCORPORATION

The Herb Shop of Central Florida, INC.
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.
ARTICLE I - CORPORATE NAME
The Hehb Shop of Central Florida, Inc.
ARTICLE II - DURATION
This corporation shall exist perpetually unless dissolved according to Florida law.
ARTICLE III - PURPOSE
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.
ARTICLE IV - CAPITAL STOCK
The corporation is authorized to issue <u>Five hundred</u> shares (500) of <u>One</u>
Dollar(s) (\$ 1,00 par value Common Stock, which shall be designated "Common Shares."
ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT
The name and street address of the Initial Registered Agent of this Corporation is:
DAVID W. Keaton DDRESS 979 West STATE BOAD 434
1 ELOPIDA 377 E/ ZIP 32750
THE DRINCIPAL ADDROSS IS INE SAME.  ARTICLE VI - INITIAL BOARD OF DIRECTORS
This corporation shall have <u>One</u> ( <u>1</u> ) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:
NAME David Keaton
ADDRESS // 5 Shady /a/C STATE F/ ZIP32750-2713
CITY Long wood STATE FL ZIP 52/50-ZIP
NAME
ADDRESS
CITY STATE ZIP
NAME
ADDRESS
CITY STATE ZIP

## ARTICLE VII - INCORPORATORS

The names and addresses of the person(s) signing these Articles of Incorporation are as follows:

NAME David Keaton		
ADDRESS Shalu Wale		
CITY Longwood	STATE F/	ZIP 32750-27/R
NAME		211 22 100 211
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS	<del> </del>	
CITY	STATE	ZIP
	K350-179-	(Seal)  (Seal)  (Seal)  (Seal)
STATE OF FLORIDA  SS  COUNTY OF SUMMOD  SS		
DAVLO W. KFATON /F  K350-179-60-361-0	nowledgements in the State as	
cknowledged before me that HE execu	who executed the foregoing atted these Articles of Incorporated	Articles of Incorporation, and who oration.
N WITNESS WHEREOF, I have hereunto affixed a lay of, 19 98.	(Notary Public, State of Florida	
	My Commission expires:	· · · · · · · · · · · · · · · · · · ·

## CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

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OF

RETARY OF STATE

Pursuant to Florida Statutes Sections 48.091 and 607.034, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

has named

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

#### ACKNOWLEDGEMENT T

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.