30000(63792 Requestor's Name Dr. M. C. Hamilton P.D. Box 681722 Miami, Fl 33168 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy ☐ Walk in Pick up time Certificate of Status Photocopy Will wait ☐ Mail out AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS OUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials 911 7-21-98

ARTICLES OF INCORPORATION

<u>OF</u>

HAMILTON'S NATIONAL HEALTH & FITNESS ACADEMY INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

HAMILTON'S NATIONAL HEALTH & FITNESS

ACADEMY INC.

98 JUL 17 AM 9: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

153 N.E.141 STREET SUITE # C N.MIAMI, FLORIDA 33161

ARTICLE III CAPITAL STOCK

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

Twelve Million Shares(12,000,000.00),

common stock, \$0.0001 par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

DR.M.C.HAMILTON
153 N.E.141 STREET,
SUITE #C
N.MIAMI,FLORIDA 33161

ARTICLE V INCORPORATOR(S)

The name(s) and street a	ddress(es) of the incorporator(s) to these Articles of incorpora-
tion is(are):	DR.M.C.HAMILTON
` '	153 N.E.141 STREET
	SUITE# C
	N.MIAMI, FLORIDA 33161
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	<u>.</u>
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The undersigned has the	ve) executed these Articles of Incorporation this
The dildersigned has(ha	70) oxoodiod ii looo 74 ii oloo of moof pordiion ii iio
4-	40.00
15da	ay of <u>JULY</u> , 19 <u>98</u> .
	della ula la la
•	(HETHINGET & ME)) PRESIDENT
	Signature/Title
	olgitator of Title
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	Signature/Title
	Signature/ ride
	Circulture/Title
	Signature/Title
	Signature/Title

CERTIFICATE OF DESIGNATION 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.

•	The name of the corporation is: HAMILTON'S NATIONAL HEALTH & FITNESS
	ACADEMY INC.
	The name and address of the registered agent and office is:
-	DR.M.C.HAMILTON (NAME)
	153 N.E.!41 STREET SERVE
	(P.O. BOX NOT ACCEPTABLE)
	N.MIAMI, FLORIDA 33161
	(CITY/STATE/ZIP)
	~
	SIGNATURE AND JULY
	TITLE
	DATE 7/15/98

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