

TRANSMITTAL LETTER

P99 00000 3512

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

Holistic Center,

SUBJECT:

MLC<sup>1</sup> Inc.

(Proposed corporate name - must include suffix)

~~MLC Inc.~~

500002736075--4  
-01/11/99--01025--010  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

MARY LOU COOK

Name (Printed or typed)

7501 SW 32 ST

Address

MIAMI FL. 33155

City, State & Zip

(305) 775 5530 (305) 261 6534

Daytime Telephone number

FILED  
99 JAN 11 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Mary Lou Cook GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Corp. Name  
DATE 1/13/99

DOC. EXAMINER 120 NOTE: Please provide the original and one copy of the articles.

B BROCK JAN 13 1999

**ARTICLES OF INCORPORATION  
OF**

MLC HOLISTIC CENTER, INC.  
(Name of Corporation)

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 name of the corporation is: MLC HOLISTIC CENTER, INC.

**ARTICLE II - DURATION**

The 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 One Thousand Shares (1,000) of one Dollar(s) (\$ 1.00) per value Common Stock, which shall be designated "Common Shares".

**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT**

The principle office, if known, or the mailing address of the corporation is:

NAME: \_\_\_\_\_  
ADDRESS: 7501 SW 32 Street  
CITY: Miami, Florida 33155

The name and Street address of the Initial Registered Agent of this Corporation is:

NAME: Mary Lou Cook  
ADDRESS: 7501 SW 32 Street  
CITY: Miami Florida 33155

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## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This Corporation shall have ONE (1) 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 name(s) and addresses of the initial director(s) of the corporation are as follows:

NAME: Mary Lou Cook  
ADDRESS: 7501 SW 32 Street  
CITY: Miami Florida 33155

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_

## ARTICLE VII - INCORPORATORS

Names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME: Mary Lou Cook  
ADDRESS: 7501 SW 32 Street  
CITY: Miami Florida 33155

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_

In Witness Whereof, the undersigned subscriber(s) have executed these Articles of Incorporation this 6 day of Jan, 1999.

Mary Lou Cook (Seal)

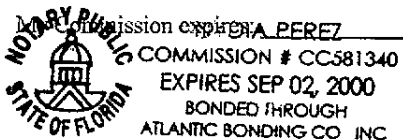
STATE OF FLORIDA       )  
                                )SS  
COUNTY OF DADE     )

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Mary Lou Cook known to me to be the person who executed the foregoing Articles of Incorporation, and who acknowledged before me that Mary Lou Cook executed these Articles of Incorporation

In Witness Whereof, I have hereto affixed my hand and seal, in the State and County aforesaid, this 6<sup>th</sup> day of January, 1999.

Notary Seal

Nydia Pera,  
(Notary Public, State of Florida at Large)



ACCEPTANCE OF REGISTERED AGENT

*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*

Mary Lou Cook  
Signature/Registered Agent

1-6-99

Date

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