TRANSMITTAL LETTER 99000028625

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

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	Health Concepts of Flo	vriđa. Tnc.		==
SUBJECT:		ate name - must include suffi	ix)	•
			99 MAR 23 SECRETARY TIALLAHASSE	117 .4.
Enclosed is an origina	al and one(1) copy of the articles	s of incorporation and a cl	neck for: FF F	-
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	S87.50 STATE Filing Fee, A Certified Copy & Certificate of Status	
		ADDITIONAL COR	PY REQUIRED	
FROM:	Linda L. Hasl	nman inted or typed)		
		Circle, #2411		
	Sarasota, FL	34238 State & Zip	<u></u>	'
	(9 <u>41</u>) <u>927</u> –78	•	· · · · · · · · · · · · · · · · · · ·	13
	Daytime To	elephone number		*
	F. CHE	MAR 2 9 1999	the articles. 599	740
N	NOTE: Please provide the or	iginal and one copy of	the articles.	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 18, 1999

LINDA L HASHMAN 4432 WINNERS CIRCLE #2411 SARASOTA, FL 34234

SUBJECT: HEALTH CONCEPTS OF FLORIDA, INC.

Ref. Number: W99000006525

We have received your document for HEALTH CONCEPTS OF FLORIDA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 299A00013403

ARTICLES OF INCORPORATION

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

ARTICLE I NAME	A	RTI	CLE	I	NAME
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The name of the corporation shall be:

NATUPAL HEALTH OPTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

P. O. Box 7354 North Port, FL 34287

ARTICLE III SHARES

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

100

<u>ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

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

Linda L. Hashman 4432 Winners Circle, #2411 Sarasota, FL 34238

ARTICLE V INCORPORATOR

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

Linda L. Hashman 4432 Winners Circle, #2411 Sarasota, FL 34238

Signature/Incorporator

3/9/90 Date

(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 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

Nata