

TRANSMITTAL LETTER

P99000041726

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

SUBJECT:

FOOT HEALTH PRODUCTS, INC.

(Proposed corporate name - must include suffix)

200002860302-3  
-05/03/99-01096-019  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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 of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM:

B. ROBERT FABRICANT

Name (Printed or typed)

21000 BOCA RIO ROAD

Address

BOCA RATON FLA 33432

City, State & Zip

561-487-3338

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 MAY -3 PM 1:40

FILED

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

T. SMITH MAY 07 1999

## 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

The name of the corporation shall be:

FOOT HEALTH PRODUCTS, INC.

### ARTICLE II      PRINCIPAL OFFICE

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

21000 BOCA RIO ROAD  
BOCA RATON FLA 33433

### ARTICLE III      SHARES

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

100

### ARTICLE IV      INITIAL REGISTERED AGENT AND STREET ADDRESS

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

B. ROBERT FABRICANT  
21000 BOCA RIO ROAD  
BOCA RATON FLA 33433

### ARTICLE V      INCORPORATOR

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

B. ROBERT FABRICANT  
21000 BOCA RIO ROAD  
BOCA RATON FLA 33433

Signature/Incorporator

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

Date

FILED  
99 MAY -3 PM 1:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4/28/99