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TRANSMITTAL LETTER

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

SUBJECT: DR. CORO'S BREATH BUSTER CORP.

Enclosed are an orig	inal and one (1) copy of	f the artic	les of incorporation an	d a check for:
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of State	us	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
	. CORO'S BREATH BI	Name (F	ORP. Printed or typed) Idress	
<u>.</u>	CORAL GABLES, FL		tate & Zip	
-		305-444	-5066 ephone number	<u> </u>

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:
DR. CORO'S BREATH BUSTER CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3299 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY OR ALL LAWFUL ACTIVITIES OF BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES, STATE OF FLORIDA, OR ANY OTHER STATE, COUNTRY, TERRITORY OR NATION.

ARTICLE IV SHARES

The number of shares of stock is:

ONE THOUSAND SHARES OF COMMON STOCK

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

CARLOS CORO
3299 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134
PRESIDENT: AND SECRETARY

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

CARLOS CORO 3299 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CARLOS CORO 3299 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity /

Signature/Registered Agent

Signature/Incorporator

Date / 4/6/4

Date

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