Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

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FLORIDA PROFIT/NON PROFIT CORPORATION ELIXIAN AESTHETICS SURGERY INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:
ELIXIAN AESTHETICS Surgery INC
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
3750 W 16 AU SUIT 118 HIAleah 33012 FLORIDA
FLORIDA
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
JUAN Roberto REYES (P)= 20
27 P
PH 9: 2:
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
ARTICLE V INITIAL REGISTERED AGENT AND STREET AD DRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:
JUAN ROBERTO REVES
3750 W 16 AVE SUITE 118
HIALEAH FL 33012
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
JUAN ROBERTO REYES
3750 W 16 AVE SUITE 118 HIRLEAH EL 33012

Required Signatures:

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

| 10 - 27 - 2020 |
| Registered Agent | Date |
| I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

FILED 20 OCT 27 PM 9: 37