Division of Corporations

6/2/2021

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : ARIMIR SERVICES GROUP LLC

Account Number : I20200000022 Phone : (305)298-6579

Fax Number : (305)643-5225

**Enter the email address for this business entity to be used for future: annual report mailings. Enter only one email address please. **

Email Address: raissa @ convexcoppusa, co H

FLORIDA PROFIT/NON PROFIT CORPORATION PF SERVICES & WELLNESS CORP

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

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Principal str	eet address		Mailing address, if different is:
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	100		
MIAMI FL 33	196		
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Name: Raissa Fernandez Address: 14551 SW 156TH ST MIAMI FL 33196 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Raissa Fernandez Address: 14551 SW 156TH ST MIAMI FL 33196 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be the document's effective date on the Department of State's records. Having been named as registered agent to accept service of process for the above stated corporation at the place designal certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submits and accept to the Department of the Department on the Department of the Department on the Department of the Department of the Department of the Department of the Department on the Department on the Department of the Department on the Department on the Department of the Department	Mona	Florida street address (P.O. Box NOT acceptable	
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