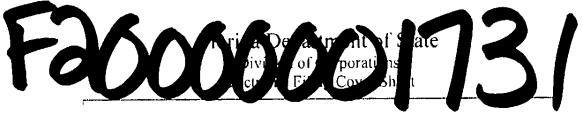
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000105025 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tc:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323) 962-8600 Fax Number : (323) 962-3889

FOREIGN PROFIT/NONPROFIT CORPORATION SALUD PARA TODOS, INC. Certificate of Status Certified Copy Page Count 07

177 000 6 0 MAA

Electronic Filing Menu

Corporate Filing Menu

Help

	COVER LET	TER		
TO: Registration Section Division of Corporations	:	€		
SUBJECT: SALUD PARA TO	DOS, INC.	•		
NOBILOT.	Name of corporation - (rust include suffix		
Dear Sir or Madam:				
The enclosed "Application by For "Certificate of Existence," or "Cabove referenced foreign corporations."	enificate of Good Standir	g" and check are submit	Business in Florida. ²¹ ited to register the	
Please return all correspondence	concerning this matter to	the following:		
Cheyenne Moseley				
	Name of Pe	Son		
Legalzoom.com, inc.				
	Firm/Compa	ny		
101 N Brand Blvd 1115 Fl				
	Address			
Glendale, CA 91203				
	City/State and	Zip code		
SARAH@SALUD.BZ			-	
E-ma	il address; (to be used for	future annual report not	ification)	
For further information concern	ing this matter, please cal	:		
Cheyenne Moseley	at (773-0888		
Name of Person	Area Code	Daytime Telepho	ne Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	ORIDA DEPARTMENT (OF STATE 878.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

SALUD PARA T	ODOS, INC.			
	rporation; must include "INCORPORATED." rp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORAT	",אסוי".	
(If name unavaila	ble in Florida, enter alternate corporate name a	dopted for the purpose of transc	neting business in Florida)	
NEW YORK	3	11-3599009		
NEW YORK (State or country under the law of which it is incorporated)		(FEI number, if applicable)		
(Date	ol'incorporation)	(Date of deration, if other than perpetual)		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) 02. F.S., to determine penalty li	ability)	
2791 Broadway I	(35), 350 Hons 607, 367 & 607, 3	32 ; 1,23, 10 3	- · · · · · · · · · · · · · · · · · · ·	
	New York, NY 10034 (Principal offic	er street address)		
	, · · · ·	•		
	(Current mailin	g address, if different)		
	V	•		
Name and stree	t address of Florida registered agent: (P.C). Box NOT acceptable)		
	United States Corporation Agents, Inc.			
Name:	5575 S. Semoran Blvd. Suite 36			
ffice Address:	5,775 St. Berkhillin 157 E. Burke St.			
	Orlando	, Florida	- 本22 整	
	(City)	, Florida 32822 (Zip code)		
. Registered ago	ent's acceptance:			
laving been names esignated in this arther agree to C	ent's acceptance, ned as registered agent and to accept serving application, I hereby accept the appoint to omply with the provisions of all statutes results and accept the obligations of my parties.	ce of process for the above s nent as registered agent and elative to the proper and cor sition as registered agent.	nated comparalization at the agreed to act in this capa applete performance of in	
	Cm	Cheyenne Mosele benall of United S Inc.	y, assistant sessetary on tales:Corporation Agents.	
-	(Registered agent's s	ignature)		

^{10.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

A. DIRECTORS			
□Chairman	Name: Sarah Jarrett	Chuimnan	Name:
□Vice Chairman	Address:	□ Vice Chairman	Address: 3220 Fairfield Ave. 6D
■ Director	Pembroke Pines, FL 33028	Director	Brons, NY 10463
■ President		□President	
□Vice President		OVice President	
□ Secretary	☐ Treasurer	Secretary	■ Treasurer
Other	□Other	≣Other	Other
€Chairman	Name:	□ Chainnan	Name:
□ Vice Chairman	Address.	□Vice Chairman	Address:
Director		Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	Trensurer	Secretary	☐Treasurer
□Other	Other	Other	Cuher
□Chairman	Name:	□ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		Director	
□President		President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	□ Secretary	☐Treasurer
Other	□Other	□Other	Other
The officer or dir she is aware that s.817.155, F.S.	Use an attachment to report more than six (6). The attachment to the index when thing your Florida Department Signature of Director ector signing this document (and who is listed in numberalse information submitted in a document to the Department, President	or Officer	hat the facts stated herein are true and that he or

(Typed or printed name and capacity of person signing application)

Page # of 7°

State of New York **} ss: Department of State**

I hereby certify, that the Certificate of Incorporation of SALUD PARA TODOS, INC. was filed on 04/26/2001, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 06th day of March two thousand and twenty.

Brendan C. Huglies

Executive Deputy Secretary of State

Brada C Higher

202003090061 * 30