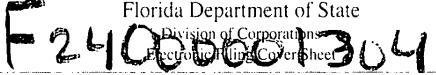
Division of Corporations

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FOREIGN PROFIT/NONPROFIT CORPORATION Simple MD, Inc.

,

Certificate of Status	1
Certified Copy	0
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Help

Simple MD, Inc. F24000001189 2131 HOLLYWOOD BLVD, STE. 101 HOLLYWOOD, FL 33020 03/07/2024

Florida Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Ft. 32301

Subject: Consent to Use Similar Name

We the undersigned, hereby authorize the use of the name, SIMPLE MD, INC., as the name of a filing entity for the purpose of submitting a filing instrument to the Secretary of State. The undersigned certifies to being the authorized by the holder of the existing name to give this consent.

Thank you,

/s/ Marja Souza

Marja Souza, Attorney-in-Fact

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.

(If name unavail	able in Florida, enter alternate corporate name ac	opted for the purpose of transacti	ng business in Florida)	
Nevada	3			
(State or counti	y under the law of which it is incorporated)	(FEI number, if applicable)		
02/27/2024	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150		lity)	
2131 Hollywood	Blvd, Suite 101, Hollywood, FL, 33020	-, , , , , , , , , , , , , , , , , , ,	· · ·	
	(Principal office	street address)		
	(Current mailing	address, if different)		
	,			
Name and stre	et address of Florida registered agent: (P.O.			
	•			
Name:	et address of Florida registered agent: (P.O. Corporate Creations Network Inc.		<u>©</u>	
Name:	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway 1	Box <u>NOT</u> acceptable)		
Name:	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach	Box <u>NOT</u> acceptable) Florida		
Name:	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway 1	Box <u>NOT</u> acceptable)	2024 MAR - 7	
Name: ffice Address: Registered ag	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City)	Box NOT acceptable) Florida 33408 (Zip code)	2024 MAR - 7 A	
Name: ffice Address: Registered ag	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City) ent's acceptance: ied as registered agent and to accept service	Box NOT acceptable)	d corporation at the	
Name: Tice Address: Registered agaving been nan signated in this	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City) ent's acceptance: ted as registered agent and to accept services application, I hereby accept the appointment.	Box NOT acceptable) Florida 33408 (Zip code) to of process for the above state out as registered agent and agr	ed corporation at the ree to act in this capa	
Name: flice Address: Registered ag aving been nan esignated in this rther agree to c	et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City) ent's acceptance: ied as registered agent and to accept service	Box NOT acceptable) Florida 33408 (Zip code) r of process for the above state out as registered agent and agrative to the proper and comple	ed corporation at the ree to act in this capa	

^{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.

A. DIRECTORS							
□Chairman	Ariel Soffer Name:	□ Chairman	Name:				
□Vice Chairman	Address: 2131 Hollywood Blvd, Suite 101	□Vice Chairman	Address:				
Director	Hollywood, FL, 33020	□Director					
□President	v Address of the Control of the Cont	□President		··· page			
□Vice President		□Vice President					
■ Secretary	[]Treasurer	□ Secretary		□Treasurer			
■Other CEO	■Other CFO	□Other		□Other			
□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			
							
□Chairman	Name:	□Chairman 		<u></u>			
□Vice Chairman	Address:						
Director		Director					
□President		□President	···				
□Vice President	**************************************	□Vice President					
☐ Secretary	Treasurer	□Secretary		□Treasurer			
Other	Other	Other		Other			
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. Signature of Director or Officer							
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or the lighter that false information submitted in a document to the Department of State constitutes a third degree fellow as provided for in							

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he of she is aware that 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.

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

1. FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **Simple MD**, **Inc.**, as a DOMESTIC CORPORATION (78) duly organized or formed and existing, or duly qualified or registered, as applicable, under and by virtue of the laws of the State of Nevada since 02/27/2024, and is in good standing in this state.



Certificate Number: B202402294404206

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 02/29/2024.

tqular

FRANCISCO V. AGUILAR Secretary of State