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DIVISION OF CONTOR AT 6 ...

COVER LETTER

19 MAY 23 44 8: 40

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

Penta Found	lation USA, Inc ,				
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed is an original	and one (1) copy of the Art	ticles of Incorporation and	a check for ;		
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO			
FROM:	Mitch Helfer, CPA				
Name (Printed or typed)					
4000 Ponce de Leon Blvd, Suite 470					
		Address	-		
	Coral Gables, FL 33146				
		City, State & Zip			

(305) 567-3152

info@cpamiami.com

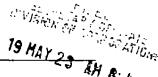
NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

Daytime Telephone number

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)



	the corporation shall be:		- 141 2 h
ARTICLE I	I PRINCIPAL OFFICE		19 MAY 23 &H B: 6
<u>79</u>	Principal <u>street</u> address: 9 Crandon Blvd, Suite 1207	Mailing ac	ddress, if different is:
Ke	ey Biscayne, FL 33149		
ways to pre	e for which the corporation is organized vent, diagnose and treat diseases in chil	Organization is formed for the purpos is: dren, conducting clinical studies, training ectious diseases. The organization is an open	programs and infrastructure
		sease, including researchers, clinicians, reg	
section 501 for exempt	purposes, such as a charitable, religious V MANNER OF ELECTION The will be appointed by the board periodi NITIAL OFFICERS AND/OR D.	IRECTORS	he remaining assets must be used
Address	799 Crandon Blvd Ste 1207 Key Biscayne, FL 33149	Name and Title: Director Address:	
Address	799 Crandon Blvd Ste 1207 Key Biscayne, FL 33149	Address: Name and Title:	
Address Name and T Address	799 Crandon Blvd Ste 1207 Key Biscayne, FL 33149 itte:	Address: Name and Title:	

Name and Title	:	Name and Title:	- 2 - 1 King Gar
Address		Address:	19 MAY 23 6H 8:
			E & & & & & & & & & & & & & & & & & & &
Name and Title	:	_ Name and Title:	
Address		Address:	
ARTICLE VI The name and	REGISTERED AGENT Florida street address (P.O. Box NOT acc	eptable) of the registered agent	is:
Name:	Rajendra Pahwa		
Address:	799 Crandon Blvd Ste 1207		
	Key Biscayne, FL 33149		
	INCORPORATOR address of the Incorporator is: Mitch Helfer, PA		
Address:	4000 Ponce de Leon Blvd #470		
	Coral Gables, FL 33146		
Effective date, i	EFFECTIVE DATE: f other than the date of filing: April 30, 1 date is listed, the date must be specific a	(QPEI	
	te inserted in this block does not meet the a ective date on the Department of State's rec		rements, this date will not be listed as the
Having been ni certificate, I am	familiar with and accept the appointment	of process for the above stat as registered agent and agree t	ed corporation at the place designated in this o act in this capacity
	Forahus		April 30, 2019
	Required Signature of Registered	d Agent	Date
	cument and affirm that the facts stated her nt of State constitutes a third degree felony		iny false information submitted in a document F.S.
	KMahua		April 30, 2019
	Required Signature of Inco	rporator	Date