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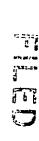




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## **COVER LETTER**

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

SUBJECT: Zepp Welln				
		ORATE NAME – <u>MUST INC</u>		
\$70.00 Filing Fee	und one (1) copy of the Art  \$78.75  Filing Fee &  Certificate of  Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate	
FROM:    Name (Printed or typed)				
	7950 NE Bayshore Court Unit West 2012 Address			
	Miami, Florida 33138	City. State & Zip	-	

305-606-2116

missrachaelcarter@gmail.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)

<u> ARTICLE II — PRINCIPAL OFFIC</u>	<u>E</u>			
Principal <u>street</u> addro 7950 NE Bayshore Court U	•	Mailing address, if different is:		
– Miami, Florida 33138 	· · · · · · · · · · · · · · · · · · ·			
ARTICLE III PURPOSE  The purpose for which the corporation trauma victims.	is organized is:  Providing low to no cost therapeutic	and health testing services to		
All initial directors to be appointed t	CTION The manner in which the directors are elected an by Zep Wellness Corp. founder Rachel Carter.	d appointed:		
All initial directors to be appointed by ARTICLE V INITIAL OFFICERS	by Zep Wellness Corp. founder Rachel Carter.			
All initial directors to be appointed by ARTICLE V INITIAL OFFICERS  Name and Title:	by Zep Wellness Corp. founder Rachel Carter.  SAND/OR DIRECTORS  Name and Title:			
All initial directors to be appointed by ARTICLE V INITIAL OFFICERS  Name and Title:  Address	by Zep Wellness Corp. founder Rachel Carter.  SAND/OR DIRECTORS  Name and Title:  Address:			
All initial directors to be appointed by ARTICLE V INITIAL OFFICERS  Name and Title:  Address  Name and Title:	by Zep Wellness Corp. founder Rachel Carter.  SAND/OR DIRECTORS  Name and Title:			
All initial directors to be appointed by ARTICLE V INITIAL OFFICERS  Name and Title:  Name and Title:	Name and Title:  Name and Title:  Address:  Address:	2019 OCT 15		

Name and Title:		Name and Title:	_ <del>_</del>
Address		Address:	_
_			<del></del>
_			<del></del>
Name and Title:_		Name and Title:	
Address		Address:	_
_			_
_			_
	<u>REGISTERED AGENT</u> prida <u>street address</u> (P.O. Box NOT accep	table) of the registered agent is:	
Name:	Rachael Carter		
Address:	7950 NE Bayshore Court Unit West	2012	
	Miami, FL 33138	···	
	W.Connon ATAR		
	INCORPORATOR dress of the Incorporator is:		
Name:	Rachael Carter		
Address:	7950 NE Bayshore Court Unit West 2012		
	Miami, FL 33138	<u> </u>	
ARTICLE VIII	EFFECTIVE DATE:	2020	
Effective date, if ( (If an effective date)	other than the date of filing:	d cannot be more than five days prior or 90 days at	ter the filing.)
Note: If the date document's effect	inserted in this block does not meet the appive date on the Department of State's recor	plicable statutory filing requirements, this date will no rds.	be listed as the
Having been/nan certificate, Lam fo	ned as registered byent to accept service of imiliar with and accept the appointment as	of process for the above stated corporation at the pla registered agent and agree to act in this capacity	ce designated in this
1 Xa	OHOTTAM)	10/9/20	19
<del></del>	Required Signature of Registered.	_	
I submit this docu	ment and affirm that the facts stated herei of Spate <u>constitutes athird degr</u> ee felony g	infire true. I am aware that any false information sub is[provided for in s.817.155, F.S.	mitted in a document
i Hot	THE MALL	10/9/20	19
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Becamred Signature of Incorp	porator Da	te