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TERESA ROMAN (TALLAHASSEE RI	EPRESENTATIVE)	OFFICE USE ONLY	
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Walk in Pick up time	2.00	Certified Copy	
Mail out Will wait	Photocopy	Certificate of State	, 15
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•	Other		iner's Initials

43

### ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I - NAME

The name of the corporation shall be:

International Institute For Therapeutic Healing, Inc.

### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

330 SW 51 CT. CORAL GAbles, Fl. 33/34

# ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 70

## ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Geli ANI R. LOPEZ 330 S.W. 51 CT. Coral Gables, Fl. 33/34

### ARTICLE V - INCORPORATOR

the name and street daaress of the incorporator to these Articles of
Incorporation is: Geli ANI R. LOPEZ
330 S.W. SI CT.
Coral Gables F1. $33/34$ The undersigned incorporator has executed these Articles of Incorporation this $23$ day of $MA4$ 20.03
Ine undersigned incorporator has executed these Articles of $\frac{1}{2}$ $\frac{1}{$
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ARTICLE VI- DIRECTOR(S)  ARTICLE VI- DIRECTOR(S)
ARTICLE VI- DIRECTOR(S)
DE A
The name(s) and street address(es) of the director(s) to these Articles of
Incorporation is (are):
GeliANi R. LOPEZ, President
330 S.W. 51 CT.
Coral Gables, F1. 33/34 Duice Maria Matamoros (vice Preside 159109 NW 64 Ave.
Duice Maria Matamoros Cure Preside
15969 NW 604 Ave.
Apt. 402 Miamilakes, FL 33054
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature