

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : FASTKIT CORP
Account Number : I20100000009
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FLORIDA PROFIT/NON PROFIT CORPORATION
THERAPY FOR SUCCESS CORP.

Certificate of Status	0
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Help

ARTICLE OF INCORPORATION

OF

THERAPY FOR SUCCESS CORP.

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

ARTICLE I NAME

The name of the corporation shall be: THERAPY FOR SUCCESS CORP.

The principal place of business of this corporation shall be:

20012 NW. 62 nd.CT.
HIALEAH, FL. 33015

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory, or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: $100 \times \$ 10.00 = 1,000.00$

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

YUMEL AMARAN

DIRECTOR

20012 NW. 62 nd.CT.
HIALEAH, FL. 33015

ARTICLE VI INCORPORATOR(S)


The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

YUMEL AMARAN

PRESIDENT & REGISTERED AGENT (100 shares

20012 NW. 62 nd.CT.
HIALEAH, FL. 33015

The undersigned has(have) executed these Article of Incorporation this 6 day of March, 2012.



Signature/Title

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: _____
THERAPY FOR SUCCESS CORP.

2. The name and address of the registered agent and office
is YUMEL AMARAN _____
(Name)

20012 NW. 62 nd.CT.

(P. O. BOX NOT ACCEPTABLE)

HIALSAH, FLORIDA 33015

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT.

SIGNATURE



DATE 3-6-2012

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