Florida Department of State

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FLORIDA PROFIT/NON PROFIT CORPORATION

Cardioslim Weight Loss Center, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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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:

Cardioslim Weight Loss Center, Inc.

ARTICLE II PRINCIPAL OFFICE

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

7357 West Flagler Street Miami, FL 33144

ARTICLE III SHARES

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

100 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Juana M. Tamayo 10801 SW 67th Court Pinecrest, FL 33156

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940 08/09/2013 3:53:46 PM -0400 POWERED BY ORCAFAX

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Juana M. Tamayo - President/Director 7357 W. Fiaglar Street, Miami, FL 33144

ARTICLE VI INCORPORATOR(S)

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

Juana M. Tamayo 7357 W. Flagler Street, Miami, FL 33144

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

<u>16th</u> day of <u>July</u> 20 13

Juana M. Tamayo

Signature

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2. The name and address of the registered agent and office is:

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

1. The name of the corporation is: Cardioslim Weight Loss Center, Inc.

PURSUANT TO THE PROVISIONS OF SECTION 607.0501. FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

	Juana M. Tamayo
	Name
	10801 SW 67th Court
	(P.O. Box or Muil Drop Bax NOT Acceptable)
	Pinecrest, FL 33156
	(City / State / Zip)
corporation at the place designated it agent and agree to act in this capacity	ent and to accept service of process for the above stated in this certificate, I hereby accept the appointment as registered in this certificate, I hereby accept the appointment as registered in I further agree to comply with the provisions of all the statutes erformance of my duties, and am familiar with and accept the end agent.
,	
Juana M. Tamayo SIGNATURE	07/16/2013 (Date)