

JUL/29/2015/WED 01:35 PM

7/29/2015

FAX No.

P. 001

P15000183883

Division of Corporations

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
BETTER LIFE RESEARCH, CORP.**

Certificate of Status	0
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FAX No.

P. 002

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: BETTER LIFE RESEARCH, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1651 W 37 ST

STE 404

HIALEAH, FL 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROBERTA ASCENCION (D)

Name and Title: _____

Address: 1651 W 37 ST

Address: _____

STE 404

HIALEAH, FL 33012

Name and Title: MARIA PEREZ (V/P)

Name and Title: _____

Address: 1651 W 37 ST

Address: _____

STE 404

HIALEAH, FL 33012

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: AYMEE CABALLERO
 Address: 1651 W 37 ST STE 404
HIALEAH, FL 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ROBERTA ASCENCION
 Address: 1651 W 37 ST STE 404
HIALEAH, FL 33012

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

 Required Signature/Registered Agent
 07/28/2015
 Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 Required Signature/Incorporator
 07/28/2015
 Date