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FLORIDA PROFIT/NON PROFIT CORPORATION HEALING HANDS ZERENITY, INC.

Certificate of Status 0 Certified Copy 1 Page Count 04

Estimated Charge \$78.75

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Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of Healing Hands zerenity, Inc. of Doc# P14000074703 are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.

Very Sincerely,

Wilfred Miliah

15 NOV -5 PH 1:53
SECRETARY OF STATE

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11/03/2015 16:05

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LOR REKATOS OL MITHM

#1617 P.003/003

11/3/2015

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act. hereby adopts the following Articles of Incorporation.

<u>NAME</u>

The name of the corporation shall be:

HEALING HANDS ZERENITY, INC. (47-1795715)

ARTICLE II

<u>PRINCIPAL OFFICE</u>

The principal place of business and mailing address of this corporation shall be: 1630 NE 26TH ST STE 101 WILTON MANORS, FL 33305

ARTICLE III

SHARES

The number of shares of stock that this corporation is numberized to have ourstanding at any one time in: 1000 SHARES @ \$1.00 PER VALUE

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida Street address of the initial registered agents is:

WILFRED MILIAN 1650 NE 26TH ST STE 101 WILTON MANORS, FL 33305

ARTICLE V

<u>INCORPORATOR</u>

The name and address of the incorporator to these Articles of Incorporation are:

WILFRED MILIAN 1650 NE 26TH ST STE 101 WILTON MANORS, FL 33305

ARTICLE VI DIRECTOR

The name and address of the director to these Articles of Incorporation age:

WILFRED MILIAN - PRES 1650 NE 267H &T STE 101

TILPON MAMORS, FL 33305

Signature/Incorporator

Haring been sufficiel as registered agent and to accept services of process for the above stated corporation of the place designated by this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further afree to comply with the provisions of all statues relating to the proper and complete performance of my flates, and I am familiar with and accept the obligations of my position as registered ayens,

Signature/incorporator

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