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FLORIDA PROFIT/NON PROFIT CORPORATION LEFKADA SOULA, INC.

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ARTICLES OF INCORPORATION OF

LEFKADA SOULA, INC.

The undersigned hereby forms a Corporation under the following charter of Articles of incorporation:

<u>ARTICLE 1</u>

The name of this Corporation shall be:

LEFKADA SOULA, INC.

ARTICLE II

The principal place of business/mailing address is:

2006 BONISLE CTRCLE PALM BEACH GARDENS, FL 33418

ARTICLE III

This Corporation is organized for the purpose of transacting any or all-lawful business.

ARTICLE IV

This corporation is authorized to issue one hundred shares of one-dollar (1,00) par common stock.

ARTICLE V

This Corporation shall have TWO (2) director initially. The number of directors may be either increased or diminished from time to time by the By Laws, but shall never be less than one (1). The names and addresses of the initial directors of this Corporation are:

CHRISOULA LIAPI 2006 BONISLE CIRCLE PALM BEACH GARDENS, FL. 33418

NIKOLAOS KIKERIS 2006 BONISLE CIRCLE PALM BEACH GARDENS, FI. 33418 16 HAY 23 PM 2: 20
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ARTICLE VI

The name and address of the initial registered agent of this corporation is:

CHRISOULA LIAPI 2006 BONISLE CIRCLE PALM BEACH GARDENS, FL 33418

ARTICLE VII

The name and address of the incorporator of this corporation is:

CHRISOULA LIAPI 2006 BONISLE CIRCLE PALM BEACH GARDENS, FL 33418

ARTICLE VIII

SIGNATURE CA

CHRISOULA LIAPI, Incorporator

TITLE: President

DATE: 5/23/16

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the state of Florida, submits in the state of Florida.

1 The name of the Corporation is:

LEFKADA SOULA, INC.

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

CHRISOULA LIAPI 2006 BONISLE CIRCLE PALM BEACH GARDENS, FL 33418

flaving been named as registered agent and to accept service of process for the above stated Corporation in the place designated in this certificate, I hereby accept the appointment as registered agent and agree to not 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 registered agent.

CIGNIATTIRE.

THRISOULA LIAPI, Registered Agent

DATE: 5/23/16

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SECRETARY OF SIAID