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

From:
Account Name : BARINAS & ASSOCIATES INC.
Account Number : I20000000082
Phone : (305)871-0889
Fax Number : (305)870-9623

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**FLORIDA PROFIT/NON PROFIT CORPORATION
PLUM SPA INC**

Certificate of Status	1
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

PLUM SPA INC

ARTICLE II: PRINCIPAL OFFICE

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

**2132-34 WEST 68TH ST
HIALEAH, FL 33016**

ARTICLE III: SHARES

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

1000 SHARES AT NO PAR VALUE

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**YING MENG
2132-34 WEST 68TH ST
HIALEAH, FL 33016**

ARTICLE V: INCORPORATORS

**YING MENG
3977 W 9TH LANE
UNIT 4
HIALEAH, FL 33012**

ARTICLE VI: OFFICERS/DIRECTORS

**PRESIDENT:
YING MENG
3977 W 9TH LANE
UNIT 4
HIALEAH, FL 33012**

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

**3RD JANUARY
____ day of _____, 2017**

(An additional article must be added if an effective date is requested.)



Signature

**CERTIFICATE OF DESIGNATION OF
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 THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.**

The name of the corporation is:

PLUM SPA INC

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

YING MENG

(NAME)

**3977 W 9TH LANE
UNIT 4**

(P.O. BOX OR MAIL DROP BOX NOT ACCEPTABLE)

HIALEAH, FL 33012

(CITY, STATE, ZIP)

Having been named as registered agent and service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment 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 registered agent.


(SIGNATURE)

JANUARY 3, 2017

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

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