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LAZARUS CORPORATE FILING SERVICE, FLORIDA

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**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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**FLORIDA PROFIT/NON PROFIT CORPORATION
KETOGENESIS INC.**

Certificate of Status	0
Certified Copy	1
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME: The name of the corporation is:KEYO GENESIS INC.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

981 NW 129 AVENUE.MIAMI, FL 33182**ARTICLE III SHARES:** The number of shares of stock is:100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Flor de Maria Miranda(PRESIDENT)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

981 NW 129th avenueMiami, FL 33182FLOR DE MARIA MIRANDA**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:FLOR DE MARIA MIRANDA981 NW 129th AVENUEMIAMI FL 33182

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Required Signatures:

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

Flor de Maria Miranda 2.12.18
Registered Agent 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.

Flor de Maria Miranda 2.12.18
Incorporator Date

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