Electronic Articles of Incorporation For

P18000027120
FILED
March 20, 2018
Sec. Of State
mtmoon

MIA BEST CARE CORP.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

MIA BEST CARE CORP.

Article II

The principal place of business address:

717 PONCE DE LEON BLVD
219
CORAL GABLES, FL. US 33134

The mailing address of the corporation is:

717 PONCE DE LEON BLVD
219
CORAL GABLES, FL. US 33134

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

100

Article V

The name and Florida street address of the registered agent is:

LUCIANO PUENTES
717 PONCE DE LEON BLVD
219
CORAL GABLES, FL. 33134

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: LUCIANO PUENTES

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Article VI

The name and address of the incorporator is:

LUCIANO PUESNTES
717 PONCE DE LEON BLVD
219
CORAL GABLES, FL 33134

Electronic Signature of Incorporator: LUCIANO PUENTES

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
LUCIANO PUENTES
717 PONCE DE LEON BLVD
CORAL GABLES, FL. 33134 US

Article VIII

The effective date for this corporation shall be:

03/21/2018