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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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RECEIVED
2018 JUN 21 AM 9:50
CORPORATION
COMMERCIAL
REGISTRATION SERVICES

**FLORIDA PROFIT/NON PROFIT CORPORATION
BEST WELLNESS REHAB CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

N. SAMS
JUN 22 2018

2ND REQUEST

ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Best Wellness Rehab Corp

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

3501 NW 12 TR.

Miami FL 33125

ARTICLE III SHARES: The number of shares of stock is:

100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Pedro Luis Perez (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Pedro Luis Perez

3501 NW 12 TR

Miami FL 33125

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Pedro Luis Perez

3501 NW 12 TR

Miami FL 33125

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11:15:56 AM

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

Robert C. Deary

Registered Agent / Incorporator

6/18/18
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.

Incorporator

Date

DEPARTMENT OF STATE, FLORIDA

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