

**P18000061371**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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2018 JUL 13 PM 4:09 DIVISION OF CORPORATIONS COMMERCIAL SERVICES TALLAHASSEE, FLORIDA	<b>FLORIDA PROFIT/NON PROFIT CORPORATION</b> <b>ACUPUNCTURE FIRST, INC.</b>		2018 JUL 16 AM 8:48 SECRETARY OF STATE TALLAHASSEE, FLORIDA <b>FILED</b>
	Certificate of Status	0	
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July 13, 2018

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

EXPRESS CORPORATE FILING

SUBJECT: ACUPUNCTURE FIRST, INC.  
REF: W18000064149

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Tyrone Scott  
Regulatory Specialist II  
New Filings Section

FAX Aud. #: E18000201462  
Letter Number: 318A00014448

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

**ARTICLE I NAME** ACUPUNCTURE FIRST, INC.

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**Principal street address

3570 SW 136 CT.

MIAMI, FL 33175

Mailing address, if different is:

SAME

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: MERCY GOMEZ (PSD)

Address: 3570 SW 136 CT

MIAMI, FL 33175

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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2018 JUL 16 AM 8:18  
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TALLAHASSEE, FLORIDA

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MERCY GOMEZ  
Address: 3570 SW 136 CT  
MIAMI, FL 33175

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: MERCY GOMEZ  
Address: 3570 SW 136 CT  
MIAMI, FL 33175

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

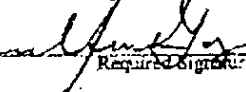
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

  
Required Signature/Registered Agent

7/10/18  
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.*

  
Required Signature/Incorporator

7/10/18  
Date