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Division of Corporations

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From:

Account Name : LEGALING CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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## FLORIDA PROFIT/NON PROFIT CORPORATION ENMED CHEMICALS, INC.

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## ARTICLES OF INCORPORATION

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

<u>ICLE II PRIN</u>	Principal <u>street</u> address		Mailing address, if different is:
0 NW 64TH AV	E. #305	SAME	
LEAH, FL 3301	5		
	the corporation is organized is:	, SALES & PURCI	IASE OF CHEMICAL PRODUCT
RELATED SER			
	o pe		
ICLETY SHAF			
ICLE IV SHAF number of shares o	RES 100 f stock is:		
ICLE IV SHAP umber of shares o	RES 1 stock is:		
ICLE IV SHAP umber of shares o	AL OFFICERS AND/OR DIRECTORS NORIMEL BADELL, PRESIDENT	Name and Title	
ICLE IV SHAP number of shares of ICLE V INITI Name and Fit	RES 1 stock is:	Name and Title	MICHAEL E. SANCHEZ, VICE
ICLE IV SHAP number of shares of ICLE V INITI Name and Fit	AL OFFICERS AND/OR DIRECTORS  NORIMEL BADELL, PRESIDENT  5621 NW 112 CT  DORAL, FL 33178	Name and Title	MICHAEL E. SANCHEZ, VICE 5621 NW 112 CT
ICLE IV SHAP number of shares of ICLE V INITE Name and Fit Address	AL OFFICERS AND/OR DIRECTORS  NORIMEL BADELL, PRESIDENT  5621 NW 112 CT  DORAL, FL 33178	Name and Title Address:	MICHAEL E. SANCHEZ, VICE 5621 NW 112 CT DORAL, FL. 33178
ICLE IV SHAP number of shares of ICLE V INITE Name and Fit Address	AL OFFICERS AND/OR DIRECTORS  NORIMEL BADELL, PRESIDENT  5621 NW 112 CT  DORAL, FL 33178	Name and Title Address:  Name and Title	MICHAEL E. SANCHEZ, VICE 5621 NW 112 CT DORAL, FL. 33178
ICLE IV SHAP  Sumber of shares of  ICLE IV INITY  Name and Fit  Address  Name and Title	AL OFFICERS AND/OR DIRECTORS NORIMEL BADELL, PRESIDENT 5621 NW 112 CT DORAL, FL 33178 ENZA F. SANCHEZ, SECRETARY	Name and Title Address:  Name and Title	MICHAEL E. SANCHEZ, VICE 5621 NW 112 CT DORAL, FL. 33178 ENZO J. SANCHEZ, DIRECTOR
ICLE IV SHAP  Sumber of shares of  ICLE IV INITY  Name and Fit  Address  Name and Title	AL OFFICERS AND/OR DIRECTORS  NORIMEL BADELL, PRESIDENT  5621 NW 112 CT  DORAL, FL 33178  ENZA F. SANCHEZ, SECRETARY  5621 NW 112 CT	Name and Title Address:  Name and Title	MICHAEL E. SANCHEZ, VICE 5621 NW 112 CT  DORAL, FL. 33178  ENZO J. SANCHEZ, DIRECTOR 5621 NW 112 CT
ICLE IV SHAP  Sumber of shares of  ICLE IV INITY  Name and Fit  Address  Name and Title	AL OFFICERS AND/OR DIRECTORS  NORIMEL BADELL, PRESIDENT  5621 NW 112 CT  DORAL, FL 33178  ENZA F. SANCHEZ, SECRETARY  5621 NW 112 CT  DORAL, FL 33178	Name and Title Address:  Name and Title Address:	MICHAEL E. SANCHEZ, VICE 5621 NW 112 CT  DORAL, FL. 33178  ENZO J. SANCHEZ, DIRECTOR 5621 NW 112 CT
CLE IV SHAP number of shares of CLE V INITI Name and Fit Address  Name and Title Address	AL OFFICERS AND/OR DIRECTORS NORIMEL BADELL, PRESIDENT 5621 NW 112 CT DORAL, FL 33178  ENZA F. SANCHEZ, SECRETARY 5621 NW 112 CT DORAL, FL 33178  DAVID E. SANCHEZ, TREASURER 5621 NW 112 CT	Name and Title Address:  Name and Title Address:	MICHAEL E. SANCHEZ, VICE 5621 NW 112 CT  DORAL, FL. 33178  ENZO J. SANCHEZ, DIRECTOR 5621 NW 112 CT  DORAL, FL. 33178

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Name a	and Title:	Name and Title:
Addre	ss	Address:
ARTICLEVI	REGISTERED AGENT	
The <u>name and l</u>	Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	CARDENAS, SINGER, & ASSOCIATES	
Address:	829 NE 79 STREET	_
	MIAMI, FL 33138	_
		<del>-</del>
	INCORPORATOR	
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	Cardenas, Singer, & Associates	_
Address:	829 NE 79 Street	_
	Miami, FL 33138	_
		-
RTICLE FIII	other than the date of filing: 3/12/2019	(ONTION LA
и ин епесиме (	fate is listed, the date must be specific and canno	ot be more than five days prior or 90 days after the
ling.)		ga production and the second
iote: If the date to document's e	inserted in this block does not meet the applicable ffective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
laving been nag its certificaty, L	ned as registered agent of accept service of process um famillar with and accept the appointment as reg	s for the above stated corporation at the place designated in
	N / A// // // //	3/12/2019
	Required Signature/Registered Agent	
		Date
suomii tius goc enmentio the l	imient and affirm that the facts stated herein are Pepartment of State constitutes a third segree felon	true. I am aware that the false information submitted in a yas provided for in x.817.155. F.S.
		3/12/19
Regign	red Signature/Incorporator	Date