

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
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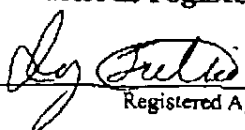
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SEP 19 2019

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



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.



Incorporator _____ Date _____

SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 SEP 18 PM 5:39
TALLAHASSEE, FLORIDA