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Division of Corporations

Fax Number : (950) 617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES INC.

Account Number : 075350000353 Phone : (800) 221-2972 : (718)889-7420 Fax Number

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FLORIDA PROFIT/NON PROFIT CORPORATION **CDHE GROUP INC.**

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12/17/2019

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

RTICLE II PRIN	E CDHE GROUP INC. ration shall be: CIPAL OFFICE Principal street address	Mailing address	s, if different is:
S CARAVELLE D	RIVE	405 CARAVELLE DRI	VE
JPITER, FL 33458		JUPITER, FL 33458	·
RTICLE III PURI the purpose for which thich corporations m	POSE the corporation is organized is: to engage ay be organized.	in any lawful set or activity for	
RTICLE IV SHA THE NUMBER OF SHARES	RES 200 of stock is: TAL OFFICERS AND/OR DIRECTORS DANIEL & ADMINISTRE STOFFIT		2019 DEC SECRET TALLA
RTICLE IV SHA THE Number of shares RTICLE V INIT Name and Ti	RES of stock is: IAL OFFICERS AND/OR DIRECTORS tile: AND CALLANTIN PRESIDENT	Name and Title:	DEC 7 RETARY LLAHAS
RTICLE IV SHA THE NUMBER OF SHARES	RES of stock is: IAL OFFICERS AND/OR DIRECTORS tle: RANDI KARMIN/PRESIDENT	Name and Title:	DEC RETA
RTICLE IV SHA THE NUMBER OF Shares RTICLE V INII Name and Ti Address	RES of stock is: IAL OFFICERS AND/OR DIRECTORS tle: RANDI KARMIN/PRESIDENT 405 CARAVELLE DRIVE	Name and Title: Address:	DEC 7 PM 2: 1/2 RETARY OF STATE LLAHASSEE. FU
RTICLE IV SHA THE NUMBER OF Shares RTICLE V INII Name and Ti Address	RES of stock is: IAL OFFICERS AND/OR DIRECTORS tile: RANDI KARMIN/PRESIDENT 405 CARAVELLE DRIVE JUPITER, FL 33458	Name and Title: Address:	DEC 7 PM 2: 1/2 RETARY OF STATE LLAHASSEE. FU
RTICLE IV SHA The number of shares of the number of s	RES 200 of stock is: IAL OFFICERS AND/OR DIRECTORS RANDI KARMIN/PRESIDENT 405 CARAVELLE DRIVE JUPITER, FL 33458	Name and Title: Address: Name and Title: Address:	DEC 17 PM 12: 1/2 RETARY OF STATE LLAHASSEE. FL
RTICLE IV SHA The number of shares of the number of s	RES of stock is: IAL OFFICERS AND/OR DIRECTORS tle: RANDI KARMIN/PRESIDENT 405 CARAVELLE DRIVE JUPITER, FL 33458	Name and Title: Address: Name and Title: Address:	DEC 17 PM 12: 1/2 RETARY OF STATE LLAHASSEE. FL

Name and Tale:		Name and Title:		
Address		Address:		
			···	
				
RTICLE VI R	REGISTERED AGENT orida street address (P.O. Box NOT accept	able) of the registered agent is:		
	RANDI KARMIN	300,000		
Name:	405 CARAVELLE DRIVE			
Address:	JUPITER, FL 33458			
ARTICLE VII	<u>INCORPORATOR</u>	<u>ত্</u>	201	
	dress of the Incorporator is:	TAL	306	
Name:	RANDI KARMIN	LAT	(C)	
Address:	405 CARAVELLE DRIVE	AS AS	\ 	
Addiess.	JUPITER, FL 33458		PM 12: 12	
		FAI	: 12	
	EFFECTIVE DATE: other than the date of filing:	(OPTIONAL)		
(If an effective d days after the fil	ate is listed, the date must be specific and ling.)	d cannot be more than five business days prior or 90 bus		
Note: If the date the document's c	inserted in this block does not meet the ap- flective date on the Department of State's r	ecords.		
Having been nan this certificate, I	am familiar with and accept the appointme	process for the above stated corporation at the place design nt as registered agent and agree to act in this capacity	nated in	
(8)	Required Signature/Registered Ag	ent Date	- 15	
I submit this doc	nament and offices that the facts stated he	rein are true. I am aware that the false information submit	itted in a	
document to the	Department of State constitutes a third degi	ree Jerony as provided for at \$1017.1755, 1.55.		
s)	V Venn	12-16 Date	<u> K</u>	
Persi	ired Signature/Incorporator	Date	-	