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236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

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1.		THE WHY PROJECT, IN CORPORATE NAME AND DOCUM				
2.	-	(CORPORATE NAME AND DOCUM	ENT#)			
3.	-	(CORPORATE NAME AND DOCUM	ENT#)		,	
4.		CORPORATE NAME AND DOCUM	ENT#)			
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6.	-	(CORPORATE NAME AND DOCUM	ENT#)			
	ECIAI TRU(CTIONS:				

FILED

ARTICLES OF INCORPORATION

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

2019 DEC 19 AH 10: 47

SECRETARY OF STATE ARTICLE I NAME The name of the corporation shall be: The Why Project, Inc. TALLAMASSEE, FL ARTICLE II PRINCIPAL OFFICE Mailing address, it different is: Principal street address 4950 Pine Tree Drive Miami Beach, FL 33140 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Jewelry and Accessories ARTICLE IV SHARES The number of shares of stock is: 1500 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Mauricio Reglero, DPST Name and Title: 4950 Pine Tree Drive Address ____ Address: Miami Beach, FL 33140 Name and Title: Name and Title: Address _____ Address: Name and Title:_______Name and Title:______ _____ Address: Address

SECRETARY OF STATE	2018 DEC 19 AM 10: 47	111111111111111111111111111111111111111

Name a	nd Title:	Name and Title:
Addres		Address:
ARTICLE 17	REGISTERED AGENT	
	Torida street address (P.O. Box NOT acceptable	e) of the registered agent is:
Name	Angelica Barajas	
Address	4950 Pine Tree Drive	<u></u>
	Miami Beach, FL 33140	S
		N. S.
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	ddress of the Incorporator is	
Name;	Amanda J. Beren	
Address.	31416 Agoura Rd., Suite 118	— — — — — — — — — — — — — — — — — — —
	Westlake Village, CA 91361	
Effective date, if (If an effective o	EFFECTIVE DATE: Other than the date of filing date is listed, the date must be specific and can	
filing.) Note: If the date	inserted in this block does not meet the applical	ble statutory filing requirements, this date will not be listed as
the document's e	effective date on the Department of State's record	is.
Having been nai his certificate, I	med as registered agent to accept service of proc any familiar with and accept the appointment as	ess for the above stated corporation at the place designated in registered agent and agree to act in this capacity
/-/n	Required Signature/Registered Agent	12/18/2019
	Required Signature/Registered Agent	Date
	sument and affirm that the facts stated herein a Department of State constitutes a third degree fei	re true. I am aware that the false information submitted in a long as provided for in s.817.155, F.S.
	amo	12/18/2019
Requ	ired Signature/Incorporator	Date