

**Electronic Articles of Incorporation
For**

P20000002994
FILED
November 19, 2019
Sec. Of State
dlokeefe

LOCAL CPR CLASS INC

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

LOCAL CPR CLASS INC

Article II

The principal place of business address:

2114 N. FLAMINGO RD
#144
HOLLYWOOD, FL. 33028

The mailing address of the corporation is:

2114 N. FLAMINGO RD
#144
HOLLYWOOD, FL. 33028

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

100

Article V

The name and Florida street address of the registered agent is:

HOLLY M HARRISON
2114 N. FLAMINGO RD
SUITE 144
HOLLYWOOD, FL. 33028

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: HOLLY M HARRISON

Article VI

The name and address of the incorporator is:

ARI B HARRISON
2114 N. FLAMINGO RD
SUITE 144
PEMBROKE PINES

Electronic Signature of Incorporator: ARI B HARRISON

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: D
ARI B HARRISON
2114 N. FLAMINGO RD #144
HOLLYWOOD, FL. 33028

Title: D
HOLLY M HARRISON
2114 N. FLAMINGO RD #144
HOLLYWOOD, FL. 33028

Article VIII

The effective date for this corporation shall be:

11/15/2019

P200 0000 2994

AFFIDAVIT

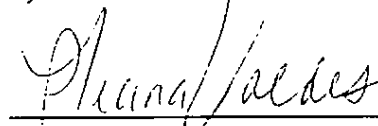
Ari B. Harrison, Registered Agent for Local CPR Class LLC resident of Broward County, State of Florida who came before me, the undersigned Notary Public, and makes this his statement under affirmation, in good faith, and under penalty of perjury, of sincere belief and personal knowledge that the following matters facts, and things set forth are true and correct, to the best of his/her knowledge **that there is no intention of reinstating Local CPR Class LLC. L17000164348. Please release the name for use to another entity.**

Dated this 20th day of December, 2019



Signature of Affiant
State of Florida
County of Broward

Subscribed and sworn to, or affirmed, before me on this 21 day of December
by Affiant **Ari B. Harrison.**



Signature of Notary Public
State of Florida
County of Broward



D O'KEEFE
JAN 1 2020