

2/26/2020

Division of Corporations

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
GOOD CHOICEX INC**

Certificate of Status	0
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**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**The name of the corporation shall be: Good Choices Inc**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

2701 Biscayne Blvd unit 8116  
Miami, FL 33137**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any and all lawful  
Business.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Esteban Higuita Estrada (7) Name and Title: \_\_\_\_\_Address 2701 Biscayne Blvd Address: \_\_\_\_\_unit 8116Miami, FL 33137

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Esteban Higuera Estrada  
Address: 2701 Biscayne Blvd Unit 8116  
Miami, FL 33137

SECRETARY OF STATE  
TALLAHASSEE, FL 08107

2020 FEB 27 AM 8:39

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Esteban Higuera Estrada  
Address: 2701 Biscayne Blvd Unit 8116  
Miami, FL 33137

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

[Signature]  
Required Signature/Registered Agent

2/25/2020  
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.

[Signature]  
Required Signature/Incorporator

2/25/2020  
Date