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FLORIDA PROFIT/NON PROFIT CORPORATION
RECOVERY RAINBOW, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

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ARTICLE I - NAME

The name of the corporation shall be:

RECOVERY RAINBOW, INC

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

2600 SW 128TH AVE
MIAMI, FL 33175

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE HUNDRED (500) SHARES OF ONE DOLLAR (\$1.00) PAR VALUE COMMON STOCK

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DAVID AMARAN CASTILLO
2600 SW 128TH AVE
MIAMI, FL 33175

ARTICLE V - INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are) :

DAVID AMARAN CASTILLO 9412 NW 120TH ST APT 123 HIALEAH GARDENS, FL 33018



Signature

ARTICLE VI - DIRECTOR(S)

The name, title and address of the office(s) of this corporation shall be:

(President) DAVID AMARAN CASTILLO 9412 NW 120TH ST APT 123 HIALEAH GARDENS, FL 33018

(Vice-President) DAVID AMARAN CASTILLO 9412 NW 120TH ST APT 123 HIALEAH GARDENS, FL 33018

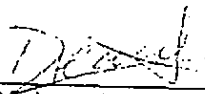
(Secretary) DAVID AMARAN CASTILLO 9412 NW 120TH ST APT 123 HIALEAH GARDENS, FL 33018

(Treasurer) DAVID AMARAN CASTILLO 9412 NW 120TH ST APT 123 HIALEAH GARDENS, FL 33018

(Director) DAVID AMARAN CASTILLO 9412 NW 120TH ST APT 123 HIALEAH GARDENS, FL 33018

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



Registered Agent Signature
DAVID AMARAN CASTILLO

DATE: 03/04/2020