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COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

JBJECT:	SURI MEN	TLAK HEDC TENAME-MUSTINCL	
losed are an orig	inal and one (1) copy of the arti	icles of incorporation and	a check for:
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Certified Copy & Certificate of Status
		ADDITIONAL CO	N I REQUIRED
FROM:	SNA M.	SURICHA (e (Printed or typed)) UÍ
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		$\mathcal{F} \subset 33/33$	
		/ State & Zip / S 7 2 2 Telephone number	
	Daytime Daytime	Telephone number 7	fassil. Co4
	E-mail address: (to be us	ed for future annual report	notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCOPRORACTION OF: SURI MENTHAL HEALTH SERVICE INC

The Undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I – NAME

The name of the Corporation Shall be:

SURI MENTHAL HEALTH SERVICE, INC

ARTICLE II - PRINCIPAL OFFICE

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

3191 GRAND AVE #1204 MIAMI, FL 33133

ARTICLE III - EFFECTIVE DATE

By the incorporator, the effective date is February 12, 2020 or upon approval of the Secretary of The State, of Florida.

ARTICLE IV PURPOSE

The purpose for which the Corporation is formed and organized to engage in activity LIKE MENTHAL HEALTH SERVICE, or any other activity or business under the law of the State of Florida.

ARTICLE V - CAPITAL STOCK

V.1 The number of the Shares that this corporation is authorized to have outstanding at any time is:

V.2 All holders of shares of common stocks shall be identical divided with each other in every respect and the holders of the common shares shall be entitle to have unlimited voting Rights on all shares and be entitle to one vote for each share on all matters on which shareholders have the right to vote.

ARTICLE VI – REGISTER AGENT AND ADDRESS

The initial address of the register office of this corporation and the name of the register Agent is:

ANA M. SURICHAQUI 3191 GRAND AVE #1204 MIAMI, FL 33133

The Register officer, the register agent or the board of Directors may change with Appropriated notice being given to the Secretary of the State in accordance with the Law.

ARTICLE VII - INCORPORATORS(S) OFFICER AND DIRECTORS

The officer of the Corporation should be:
The said name of incorporator(s) and initial board of Directors shall be:

ANA M. SURICHAQUI 3191 GRAND AVE #1204 MIAMI, FL 33133

The undersigned has(have) executed these articles of incorporation this 12th Day of February 2020.

ANA M. SURICHAQUI

President

ARTICLE VIII - SUB - CHARPTER (S) CORPORATION

The corporation may elect to be an S Corporation, as provided is Sub-Chapter S of the Internal Revenue code of 1986, as amended.

The shareholders of the Corporation may elect and if elected, shall continue such election to be and S Corporation as provided in Chapter S of the Internal Revenue Code of 1986 as amended, unless the Shareholders of the Corporation unanimously agree otherwise in writing.

ARTICLE IX - POWER OF CORPORATION

The Corporation shall have the same power as an individual to do all the things necessary to carry out its business and affairs, subjects to limitation or restriction imposed by law or these Articles of incorporation.

ARTICLE X AMENDEDNTS

This Corporation reserves the right to amend, alter, change or repeal any provision contained in these Article of incorporation herein in the manner now or hereafter prescribed by law and By the provisions of any applicable statue of the State of Florida and all rights conferred on stockholders herein are granted subject to this reservation.

In WITNESS WHEREOF, THE UNDERSIGNED HAS HEREUNTO SET HANDS AND SEAL AT MIAMI-DADE County, Florida State this 12th Day of February 2020.

ANA M. SURICHAOUL

CERTIFICATE OF DESIGNATION REGISTER AGENT REGISTER OFFICE

Pursuant to the provisions of section 604-501, Florida Status the undersigned Corporation, Organized under the laws of the State of Florida, submits the following statement in designating the register officer/register agent, in the State of Florida.

1. The Name of the Corporation

SURI MENTHAL HEALTH SERVICE INC

2. The name and address of the Register Agent and office is:

ANA M. SURICHAQUI 3191 GRAND AVE #1204 MIAMI, FL 33133

I Hereby familiar with and accept the obligation, duties, responsibilities and agree to act in this capacity as Register Agent.

SIGNATURE:

DATE: 02/12/2020