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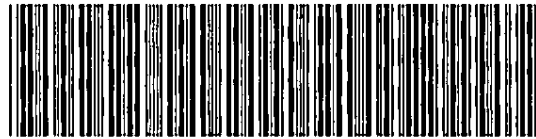
(Business Entity Name)

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20 JUN 12 AM 5:45
SECRETARY OF STATE
FALLS CHURCH, VA 22048

D O'KEEFE

JUN 24 2020

TRANSMITTAL LETTER

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

SUBJECT: THIRD EYE FITNESS, INC

Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$78.75

FROM: SIMI POTHEN
395 WINGATE CIRCEL
OLDSMAR, FL 34677

ARTICLES OF INCORPORATION

THIRD EYE FITNESS, INC

(Name of Corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural persons(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

The name of the corporation is:

THIRD EYE FITNESS, INC

ARTICLES II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLES III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLES IV - CAPITAL STOCK

The corporation is authorized to issue one hundred shares (100) of one Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME SIMI POTHEN

ADDRESS 395 WINGATE CIRCLE

CITY OLDSMAR, FL 34677

The name and street address of the Initial Registered Agent of this Corporation is:

NAME SIMI POTHEN

ADDRESS 395 WINGATE CIRCLE

CITY OLDSMAR, FL 34677

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20 JUN 12 AM 5:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director(s) initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME SIMI POTHEN

ADDRESS 395 WINGATE CIRCLE

CITY OLDSMAR STATE FL ZIP 34677

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

ARTICLE VII - INCORPORATORS

The name(s) and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME SIMI POTHEN 

ADDRESS 395 WINGATE CIRCLE

CITY OLDSMAR STATE FL ZIP 34677

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

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20 JUN 12 AM 5:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**CERTIFICATE AND ACKNOWLEDGMENT
OF REGISTERED AGENT**

CERTIFICATE OF REGISTERED AGENT

OF

THIRD EYE FITNESS, INC

(Name of Corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Corporation

at 395 WINGATE CIRCLE

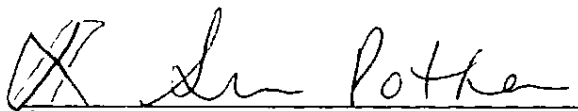
OLDSMAR, FL 34677

has named SIMI POTHEN

located at the aforesaid address, as its Registered Agent, to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.



(registered agent)

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20 JUN 12 AM 5:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA