Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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| To: | | | | | |
| | Division of Corporations | | | | ~ |
| | Fax Number : (850)617-638 | 31 | | | Ş |
| From: | | | | | en CJ |
| | Account Name : LAZARUS CORF | PORATE FILI | NG SERVICE, | INC. | Ψ,, |
| | Account Number : I20000000019 Phone : (305)552-597 | | | | |
| | Phone : (305)552-597 Fax Number : (305)675-594 | | | | |
| | LORIDA PROFIT/NON PI NK PANTHER HURRICAI | | | ION 285 | 2021 HAR - I PM |
| | Certificate of Status | | 0 | RCIA | PH F |
| • | Certified Copy | | 1 | ं क्रि | B |
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| | Estimated Charge | | \$78.75 | | |
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

| Pir | nk Panti | her Hurr | ricane Prot | tect | cti | on Corp | | | | | | |
|---------------|-------------------|-----------------|-------------------|--------------|------|--------------|-------------|-------------|-------------|-----------------|-------------|-------------|
| | | AF | RTICLE II |] | P | RINCIPA | L OF | FICE: | | | | |
| | | The pri | ncipal street | t ad | ıdo | lress and n | nailing | , addre | ess is | : | | |
| <u>19:</u> | 20 NW | 13TH S | T MIAMI, I | <u>FL</u> | _ 3 | 3125 | | | | | | _ |
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| | | | | | | | | | | - | | _ |
| ARTICL | <u>e III</u> | SHAR | ES: The nu | ı m b | ıbe | er of shares | of sto | ck is: _ | | 100 | | |
| 4 | <u>ARTIC</u> I | E IV_ | INITIA | LD | D | RECTOR | S AN | D/OR | OF | FIC | ERS: | |
| Presid | <u>dent : E</u> : | sther A | Chinchilla | | | | <u> </u> | | | | | |
| <u>Vice F</u> | <u>resider</u> | <u>ıt: Gonz</u> | alo Perez- | Mir | lira | vete | | | | | | |
| <u>Vice F</u> | <u>Presider</u> | nt: Julio | C Chinchill | la E | E | scobar | | | | | | |
| <u>Vice F</u> | <u>Presider</u> | ıt: Julio | C Chinchill | la | | | | | | | | |
| <u>Viçe F</u> | <u>Presider</u> | nt: Mark | Hickein | | | | | | | · - | | |
| | | | | | | | | | | - | | |
| ARTIC | LE V | INITI | IAL REGIS | STE | E | RED AGE | NT A | ND ST | (RE | ET / | DDRI | ess. |
| | | | eet address | | | | | | | | | |
| Esthe | er A Chi | nchilla | | | | | ···· | | | | | |
| 1920 | NW 13 | th ST | | | | | | | | | | |
| <u>Miam</u> | ii. FL 33 | 3125 | | | | | | | | | | |
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| | | | RPORATO | | | | | | | e In | corpora | itor |
| <u>Esthe</u> | <u>r A Chir</u> | <u>nchilla</u> | | | | | | | <u> </u> | | | |
| <u>1920</u> | NW 13t | h ST | , | | | | | - | | | | |
| <u>Miam</u> | <u>i. FL 33</u> | 125 | | | | | | | | | | |

Required Signatures:

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

| Ester Chirchilla | 02/26/:2021 |
|------------------|-------------|
| Registered Agent | 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.

| Ester Chirchillo | 02/26/2021 |
|------------------|------------|
| Incorporator | Date |