

4/14/2021

Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION
SUNNY SMILES BEHAVIOR CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
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Corporate Filing Menu

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

ARTICLE I NAMEThe name of the corporation shall be: SUNNY SMILES BEHAVIOR CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

30410 SEA GRAPE TERRACE SUITE 213850 SW 71ST LNBIG PINE KEY, FL 33043MIAMI, FL 33163**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: GILBERTO DIAZ MIRA (P)

Name and Title: _____

Address 30410 SEA GRAPE TERRACE

Address: _____

SUITE 2BIG PINE KEY, FL 33043

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: GILBERTO DIAZ MIRA
Address: 12850 SW 71ST LN
MIAMI, FL 33183

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GILBERTO DIAZ MIRA
Address: 30410 SEA GRAPE TERRACE SUITE 2
BIG PINE KEY, FL 33043

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.

Required Signature/Registered Agent Date 4/13/21

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.

Required Signature/Incorporator Date 4/13/21