Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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FLORIDA PROFIT/NON PROFIT CORPORATION WISE OF LIFE INC

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

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

271 MIGHT 171 1:43

NAME: The name of the corporation is: Wise of ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: 1816 May pop Rd Palm Beach . FL 33415-6336 100 SHARES: The number of shares of stock is: ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: Palm INCORPORATOR: The name and address of the Incorporator is: ARTICLE VI

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

Registered Agent B/11/2021
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.

Incorporator

111/2021

Date