Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ULLOA & COMPANY PROFESSIONAL ASSOCIATION

Account Number : I20190000086 : (305)275-1300 Fax Number : (305)275-1301

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

jonathan@ikigaisolutions.com

FLORIDA PROFIT/NON PROFIT CORPORATION Ikigai Digital Corp

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Ikigai Digital Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address is: 8780 SW 85 Terrace, Miami 33173

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jonathan Mercado Gutierrez, President

Address: 187 Tanager way, Hercules, California 94547

Name and Title: Edmundo Federico Moch Hijar, VP

Address: Blvd Panorama 603 Colonia Panorama, León, Guanajato Cp 37169, Mexico

Name and Title: Jaime Abaid Bujaidar, Treasurer

Address: Pino Suárez 209 Col Centro León Guanajuato, Cp 37000, Mexico

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ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Ulloa and Company Professional Association

14050 SW 84 Street, Suite 104, Miami, FL 33183

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is

Ulloa and Company Professional Association

14050 SW 84 Street. Suite 104, Miami, FL 33183

ARTICLE VIII EFFECTIVE DATE

Effective date, if other than the date of filing:

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

09/07/2021

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

09/07/2021