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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
ARIANNA HEALTH INSURANCES, INC

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

- **ARTICLE I NAME:** The name of the corporation is:

Arianna Health Insurance, INC

- **ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

9231 SW 22nd Terrace
Miami Florida 33165.

ARTICLE III SHARES: The number of shares of stock is: 100

- **ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Arianna Ramirez Benitez (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Arianna Ramirez Benitez
9231 SW 22nd Terrace
Miami Florida 33165

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ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Arianna Ramirez Benitez
9231 SW 22nd Terrace
Miami Florida 33165

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

X Quak _____
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 § 817.155, F.S.

X Quak _____
Incorporator Date

Effective 1-1-22

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SECRETARY
TALLAHOOSSEE, FL