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Florida Department of State
Division of Corporations
Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
INSIDEOUT MEDICAL CORP.

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

T. SCOTT

MAR - 2 2022

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:INSIDEOUT MEDICAL CORP.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

10363 NW 41ST, DORAL - FL 33178**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

- BETSY ALVAREZ President/Director
- ABEL GARRIGA President/Director

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

- BETSY ALVAREZ
10363 NW 41ST STREET DORAL
FLORIDA - 33178

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

- BETSY ALVAREZ
10363 NW 41ST STREET DORAL
FLORIDA 33178

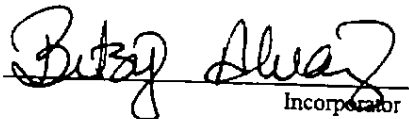
Required Signatures:

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

FEB 28th 2022
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

FEB 28th 2022
Date