

4/13/22, 10:06 AM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : ARIMIR SERVICES GROUP LLC  
Account Number : I20200000022  
Phone : (305)298-6579  
Fax Number : (305)643-5225

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

Email Address: arimirservices@gmail.com

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
WONDERMOOM CORP**

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

S. CHATHAM

APR 14 2022

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DIVISION OF CORPORATIONS  
STATE OF FLORIDA  
COMMERCIAL SERVICES

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

H22000134096

**ARTICLE I NAME**The name of the corporation shall be: WONDERMOON CORP**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1550 PENNSYLVANIA AVE APT 121

Mailing address, if different is:

MIAMI BEACH FL 33139**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: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: MARIA JOSE RODRIGUEZ - President Name and Title: \_\_\_\_\_Address: 1550 Pennsylvania Ave Apt 121 Address: \_\_\_\_\_Miami Beach FL 33139

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

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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: Maria Jose Rodriguez  
Address: 1550 Pennsylvania Ave Apt 121  
Miami Beach FL 33139

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

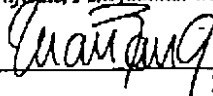
Name: Maria Jose Rodriguez  
Address: 1550 Pennsylvania Ave Apt 121  
Miami Beach FL 33139

**ARTICLE VIII EFFECTIVE DATE:**


Effective date, if other than the date of filing: 04/11/2022 (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 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*

 04/11/2022  
Required Signature/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 s.817.155, F.S.*

 04/11/2022  
Required Signature/Incorporator Date

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TALLAHASSEE, FL 32399

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