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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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FLORIDA PROFIT/NON PROFIT CORPORATION PARA MIS PADRES ADULT DAY CARE INC

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

2020 OCT 18 PM 5:44

22 OCT 18 AM 12:53
SECRETARY OF STATE
FALL ABRASSTON, FL 32201

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Para mis Padres Adult day care Inc

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

15305 NW 60TH AVENUE SUITE 100-B MIAMI LAKES, FL 33014

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

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

BRANDY GUZMAN- PRESIDENT

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

BRANDY GUZMAN 15305 NW 60TH AVENUE SUITE 100-B

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

BRANDY GUZMAN 15305 NW 60TH AVENUE SUITE 100-B

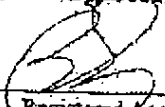
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Required Signatures:

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 Agent10/03/2022
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.



Incorporator10/03/2022
Date

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