

P23000021106

Florida Department of State  
Division of Corporations  
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## To:

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

## From:

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

**FLORIDA PROFIT/NON PROFIT CORPORATION  
MEANINGFUL LIFE CORP.**

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

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TALLAHASSEE, FLORIDA

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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:

MEANINGFUL LIFE CORP.

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

10240 SW 56<sup>th</sup> St. #109

MIAMI FL 33165

**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

GERARDO FELIX CAPOTE (P)

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

10240 SW 56<sup>th</sup> St. Suite #109

Miami FL 33165

GERARDO FELIX CAPOTE

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

GERARDO FELIX CAPOTE

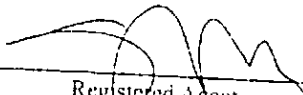
10240 SW 56<sup>th</sup> St Suite #109

MIAMI FL 33165

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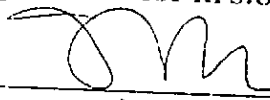
**Required Signatures:**

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 Agent

03 20 23  
\_\_\_\_\_  
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

03 20 23  
\_\_\_\_\_  
Date

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