3/29/23, 1:56 PM Division of Corporations

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Florida Department of State

Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION

MASSAGE BY VERONICA INC

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

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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: MASSAGE BY VERONICA INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

380 TAMIAMI CANAL RD MIAMI FL 33144

Mailing address, if different is:

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: VERONICA S. RODRIGUEZ (P)

Address 380 TAMIAMI CANAL RD
MIAMI, FL 33144

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

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TALLAHASSEE, FLORIDA

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: VERONICA S. RODRIGUEZ

Address: 380 TAMIAMI CANAL RD

MIAMI, FL 33144

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: VERONICA S. RODRIGUEZ

Address: 380 TAMIAMI CANAL RD

MIAMI, FL 33144

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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 filing 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.

DocuSigned by:
Veronica Rodriguez
4C52D4F398F44E7...Required Signature:Registered Agent

3/28/2023
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.

DocuSigned by:
Veronica Rodriguez
Required Signature:Incorporator

3/28/2023
Date

23 MAR 29 PM 12:57