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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	CHACHI	FITNESS	Fnc
•	(PROPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	OF I REQUIRED
FROM:	Mare i/s	n Jomez (Printed or typed)	- CPA
	6219	SW 21 ST	
	Miami city,	State & Zip	3/55
	(79)33	7-0052 elephone number	
	Daytime To	14 GOUT/O	ook. Condition
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NOTE: Please provide the original and one copy of the articles.

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

nn:		
ICLE II PRII	VCIPAL OFFICE Principal street address	Mailing address, if different is:
	SW 136 Street- # 4203 , Fl 33186	
TCLE III PUR.		
	Fitness Con	sultation
TCLE IV SHA	<u>RES</u>	
number of shares o	of stock is: 500	
TOTAL TO ENTER	I AL OFFICERO AND ON DIRECTORO	~
	ALOFFICERS AND/OR DIRECTORS	
		S. Name and Title: Cassandra M. Garcia-Vi
Address	12735 SW 136 Street -	-4203 14/35 SW 136 SE-#4203
Hadress	12735 SW 136 Street -	
riddicas	12735 SW 136 Street -	Address:
ridaicas		
		Miami, Fl 33186
	Miami, Fl 33186	retaryme and Title: Cassandra Garcia-Trea
Name and Titl	Miami, Fl 33186 Cassandra Garcia-Secr	retaryme and Title: 12735 SW 136 St - # 42
Name and Titl	Miami, Fl 33186	Miami, Fl 33186 retaryme and Title: Cassandra Garcia-Trea 12735 SW 136 St - # 42
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A	Address _						Address:	-						
	-							-			·			
	VI REGIST and Florida st				NOT acce	ptable) of th	e registere	d ager	nt is:					
Name:	Marilyn	Gor	nez,	CPA										
Address:	6219 SW	21	St											
	Miami,	Fl	331	55										
ARTICLE	VII INCOR	PQRA	<u>TOR</u>											
The <u>name</u>	and address of	the Inc	corporato	ris:										
Name:	C	assa	andra	М. (Garcia									
Addre	ss:	2735	5 SW	136	Street	-#4203								
		iami	i, Fl	33	186									
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