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**FLORIDA PROFIT/NON PROFIT CORPORATION
LUXEN CARE INC.**

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:LUXen CARE Inc.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

P: 7791 NW 46 St Unit 112 Doral 33166
M: P.O Box 440561 Miami FL 33144

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

P: Niels Moleiro

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Niels Moleiro

7791 NW 46 St. Unit 12 Doral
33166

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

Niels Moleiro

7791 NW 46 St. Unit 12 Doral
33166

EIN: 93-1666693

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 Agent06/02/23
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.

Incorporator06/02/23
Date

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