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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
WELLNESSMARU, INC**

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

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T.S.H  
12/20/23

2023 DEC 19 PM 2:20

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

EFFECTIVE: 1-1-24

ARTICLE I NAME: The name of the corporation is:

WellnessMaru, Inc

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

8440 SW 107 street

Miami, FL 33156

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

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Maria Eugenia Geist (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Maria Eugenia Geist

8440 SW 107 STREET

MIAMI FL 33156

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

MARIA EUGENIA GEIST

8440 SW 107 STREET

MIAMI FL 33156

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EIN: 93 - 4838209

**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

Maria E. Fitt 12/13/2023  
Registered Agent 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.

Maria E. Fitt 12/13/2023  
Incorporator Date

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