

2/15/24, 11:01 AM

Division of Corporations

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : Vcorp SERVICES, LLC
Account Number : 12803000067
Phone : (845)425-0077
Fax Number : (845)818-3588

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

Balancing Bliss Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2/16/24

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 624, F.S. (Profit)

ARTICLE I NAME
The name of the corporation shall be: Balancing Bliss Inc.

<u>ARTICLE II PRINCIPAL OFFICE</u> Principal <u>street</u> address	Mailing address, if different is
<u>7863 San Marcos Pl</u>	<u>7863 San Marcos Pl</u>
<u>Boca Raton, FL 33433</u>	<u>Boca Raton, FL 33433</u>

ARTICLE III PURPOSE
The purpose for which the corporation is organized is, any lawful activity

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Shoshana Kassorla, President</u>	Name and Title: _____
Address: <u>7863 San Marcos Pl</u>	Address: _____
<u>Boca Raton, FL 33433</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

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SECRETARY OF STATE

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: Vcorp Agent Services, Inc.
Address: 1200 South Pine Island Road
Plantation, FL 33301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Shoshana Kassorla
Address: 7863 San Marcos Pl
Boca Raton, FL 33433

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TALLAHASSEE, FLORIDA

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 business days prior or 90 business 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

Required Signature Registered Agent
02/14/2024
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.

Required Signature/Incorporator
02/14/2024
Date