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**FLORIDA PROFIT/NON PROFIT CORPORATION
MIRACLE SMOKE & SWEETS CORP**

Certificate of Status	0
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: MIRACLE SMOKE & SWEETS CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address6808 COLLINS AVE STE 3MIAMI BEACH, FL 33141FL 33141

Mailing address, if different is:

SAME**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 SHARES**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: KENNETH JOSEPH - P

Name and Title: _____

Address 6808 COLLINS AVE STE 3

Address: _____

MIAMI BEACH, FL 33141

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: KENNETH JOSEPH
 Address: 6808 COLLINS AVE STE 3
MIAMI BEACH, FL 33141

ARTICLE VII INCORPORATOR

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

Name: KENNETH JOSEPH
 Address: 6808 COLLINS AVE STE 3
MIAMI BEACH, FL 33141

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

Kenneth Joseph 10-21-2024
 Required Signature/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.

Kenneth Joseph 10-21-2024
 Required Signature/Incorporator Date

