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2024 DEC -2 PM 2:24
STATE
TALLAHASSEE, FL

RECEIVED

FLORIDA PROFIT/NON PROFIT CORPORATION PEDIKIDZ EDUCATIONAL SERVICES 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: PEDIKIDZ EDUCATIONAL SERVICES CORP.**ARTICLE II PRINCIPAL OFFICE**Principal street address7650 SW 117 AVENUE
MIAMI, FL 33183

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: REBECCA BELTRAN - P

Name and Title: _____

Address 7650 SW 117 AVENUE

Address: _____

MIAMI, FL 33183

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: REBECCA BELTRAN
Address: 7650 SW 117 AVENUE
MIAMI, FL 33183

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: REBECCA BELTRAN
Address: 7650 SW 117 AVENUE
MIAMI, FL 33183


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


REBECCA BELTRAN (Doc 2, 2024 11:39 EST)
Required Signature/Registered Agent

11/25/2024
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.


REBECCA BELTRAN (Doc 2, 2024 11:39 EST)
Required Signature/Incorporator

11/25/2024
Date

U1: