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Florida Department of State
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To:

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

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.
Account Number : 104512000707
Phone : (305)803-2736
Fax Number : (305)646-1527

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FLORIDA PROFIT/NON PROFIT CORPORATION
MAGUI CARE, CORP.

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

NAME

The name of the corporation shall be: MAGUI CARE, CORP.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

12219 SW 14 LANE APT 2212
MIAMI, FL. 33184

ARTICLE III

PURPOSE

The purpose for which the corporation is organized is for 'Any and all lawful business'.

ARTICLE IV

SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated ☐ COMMON SHARES. ☐

ARTICLE V

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

NANCY A. CLARO
12219 SW 14 LANE APT 2212
MIAMI, FL. 33184

Prepared by: NANCY A. CLARO
12219 SW 14 LANE APT 2212
MIAMI, FL. 33184
786 234-1153
NANCYANAYCLARO@GMAIL.COM

Electronically Sent By: BUSINESS WORLD TRANSACTIONS
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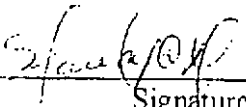
**ARTICLE VI
INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

NANCY A. CLARO
12219 SW 14 LANE APT 2212
MIAMI, FL. 33184

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

11TH day of JANUARY, 2025.

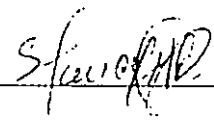
X 
Signature

**ARTICLE VII
OFFICER(S) AND DIRECTOR(S)**

The name(s) and street address(es) of the officer(s) and director(s) to these Articles of Incorporation is(are):

NANCY A. CLARO
12219 SW 14 LANE APT 2212
MIAMI, FL. 33184

DIRECTOR & PRESIDENT

X 

2025 JAN 13 AM 8:07

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: MAGUI CARE. CORP.

2. The name and address of the registered agent and office is:

NANCY A. CLARO
12219 SW 14 LANE APT 2212
MIAMI, FL. 33184

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

X 
(SIGNATURE)

JANUARY 11, 2025

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