

P23000021661

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)517-6381

From:
Account Name : ALLSTATE CORPORATE SERVICES CORP
Account Number : I20040000031
Phone : (800)906-9220
Fax Number : (800)906-9880

****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
LIBRA DIAMONDS INC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

00:21:11
2023

FILED
MAR 22 2023

2023 MAR 22 PM 12:36

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

ARTICLE I NAME

The name of the corporation shall be: LIBRA DIAMONDS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1021 IVES DAIRY ROAD, #220

1021 IVES DAIRY ROAD, #220

MIAMI, FL 33179

MIAMI, FL 33179

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: WHOLESALE-DIAMONDS

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: GABI HECKER, PRESIDENT

Name and Title: _____

Address 1021 IVES DAIRY ROAD, #220

Address: _____

MIAMI, FL 33179

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: GABI HECKER
 Address: 1021 IVES DAIRY ROAD, #220
MIAMI, FL 33179

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GABI HECKER
 Address: 1021 IVES DAIRY ROAD, #220
MIAMI, FL 33179

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

/s/ GABI HECKER

Required Signature/Registered Agent

3/17/2023

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.

/s/ GABI HECKER

Required Signature/Incorporator

3/17/2023

Date

2023 MAR 22 PM 12:36
 STATE OF FLORIDA
 DEPARTMENT OF STATE