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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 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: statenotices@vcorpservices.com

FLORIDA PROFIT/NON PROFIT CORPORATION PINEAPPLE USA INC

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ARTICLES OF INCORPORATION

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

ie name of the corporati	on shall be: PINEAPPLE USA II	NC		
<u>rticle II — Princi</u> I	PPAI. OFFICE Principal <u>street</u> address	N	failing address, if differen	nt is:
504 Bay Rd, Ste 26	07 Miami Beach, FL 33139			
RTICI.F. III PURPO he purpose for which th	SE e corporation is organized is: Software	e Developr	nent	
<u> </u>				<u> </u>
	<u>stock is:</u> 1,000,000		SION OF CORPO LLAHASSEE, F	2022 MAY 27 AM
IRTIÇLE V INITIA	<i>LOFFICERS AND/OR DIRECTORS</i> Anthony J. Wentzel, President		LORID LORID	<u>မြန်မို့</u> က် (
Name and Title	Anthony J. Wentzel, President 1504 Bay Rd, Ste 2607	Name and Title:		1¦4 © W
Address	Miami Beach, FL 33139	Address:		
		-		
Name and Title:		Name and Title.		
Address		Address: _		
Name and Title		Name and Title		
Address				
		·		

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICI E VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Vcorp Services, LLC		
Address:	1200 South Pine Island Road	_	
	Plantation, FL 33324	_	الا ت 2012 عالم 1202
	<u>INCORPORATOR</u>		CABLE AND FRANCI
The <u>name and a</u>	ddress of the Incorporator is: Melissa Zanoletti		ERRES A
Name:		-	AM 5: 31
Address:	25 Robert Pitt Dr., Suite 204	•	10 A
	Monsey, NY 10952	_	U. ·
Effective date, if (If an effective of filing.) Note: If the date	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and cannot e inserted in this block does not meet the applicable	ot be more than five days prior or 90	
the document's o	effective date on the Department of State's records.		
	med as registered agent to accept service of process f familiar with and accept the appointment as register Microm Nachison		
M	Assistant Secretary	05/:	26/2022
	Required Signature/Registered Agent	· · · · · · · · · · · · · · · · · · ·	Date
	cument and affirm that the facts stated herein are Department of State constitutes a third degree felon		mation submitted in a
If has		05/	26/2022
Required Signat	we Decorporator	Date	