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COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

1					2)	STATE OF STATE
Encle	sed is an original and	one (1) copy of the A	Articles of Incorporation and	d a check for :		
	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate		
			ADDITIONAL C	OPY REQUIRED		
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	4	Monolay	nytime Telephone number	//18		
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NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION compliance with Chapter 617, F.S., (Not for Profit)

in compliance with Ci	i A	
ARTICLE I NAME RETTO	Notative (i.M.	
The name of the corporation shall be: DEITE	7.000	
<u> ARTICLE II — PRINCIPAL OFFICE</u>		
Principal street address:	Mailing address, if different is:	
Principal <u>street</u> address: 100 N U	J 12451	
	_	
MIAMI, Fla	39/68	
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ARTICLE III PURPOSE	- Parch The FOXO	Do()
The purpose for which the corporation is organized is:	1 20000	Me
to help feed Hon	eles, a next for	2
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ARTICLE IV MANNER OF ELECTION The manner	in which the directors are elected and appointed:	
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ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	~~~~	
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Name: Address:	THE SUMMER OF THE STATE OF THE	्रिक् र जुड़े ड
ARTICLE VIII EFFECTIVE E Effective date, if other than the da (If an effective date is listed, the	ATE: te of filing: Septile and cannot be more than five	ONAL) days prior or 90 days after the filing.)
document's effective date on the l	Department of State's records.	rements, this date will not be listed as the
Having been named as registere certificate, I am familiar with and	d agent to accept service of process for the above start accept the appointment as registered agent and agree	ted corporation at the place designated in this to act in this capacity
	red Signature of Registered Agen	Date
I submit this document and affir to the Department of State consti	on that the facts stated herein are true. I am aware that tutes a third degree felony as provided for it s.817.155,	any false information submitted in a document , F.S.
- Coffice f	equired Signature of Incorporator	Date

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