13000018975

(Re	questor's Name)	-
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e.#)
(,	~ ,
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I		
	ming officer.	
u		

Office Use Only



000417862860

10/05/23--01037--00: **30.00

08/22/23--01012--005 **30.00

10/30/23--01003--001 *+53.75

2023 OCT 27 PM 6: 16
SECTION SECTION

COVER LETTER

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

SUBJECT: IMMEASURABLY MORE INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00 Filing Fee S \$78.75
Filing Fee &
Certificate of
Status

□\$78.75

Filing Fee & Certified Copy □ \$87.50

Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM:	NATALI & FRENCH Name (Printed or typed)
	5870 Jim Davis Rd
	Parrish Fr 34219
	City, State & Zip 941 730 - 0354
	Daytime Telephone number

78.75+35.00 =113.75 -30.00 -30.00 53.75 due

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

NOTE: Please provide the original and one copy of the articles.

Certificate of Conversion
For

"Other Business Entity"
Into
Plorida Profit Corporation
Non Profit

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Morida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

Non Profit	
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:	•
IMMEASURABLY MORE	
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a LLC (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)	
first organized, formed or incorporated under the laws of	
on 2-25-2018	
Enter date "Other Business Entity" was first organized, formed or incorporated	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it organized, formed or incorporated:	is now
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: MMEASURABLY MORE INC.	
Enter Name of Florida Profit Corporation	
5. If not effective on the date of filing, enter the effective date: Aug 2073 (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the liberartment of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not listed as the document's effective date on the Department of State's records.	

Page 1 of 2

Signed this DC1 20 day of OCT		2023	
New Frofit Required Signature for Florida Profit Corp			
Signature of Chairman, Vice Chairman, Direct Incorporator: NATALIS FRENCHINE		ors or Officers have not be	en sel e cted, a
Required Signature(s) on behalf of Other E	Business Entity: [See be	low for required signature	(s).]
Signature: Printed Name: NATALI & 1	ngnettitle: PR	eside.	_
Signature:		•	·
Printed Name:	Title:		
Signature:			•
Printed Name:		•	- .
Signature:	•		
Printed Name:			
Signature:			<u> </u>
Printed Name:	Title:	<u>:</u> :	<u> </u>
Signature:			
Printed Name:	Title:	· · · · · · · · · · · · · · · · · · ·	-
If Florida General Partnership or Limited I Signature of one General Partner.	Liability Partnership:	,	•
If Florida Limited Partnership or Limited 1 Signatures of <u>ALL</u> General Partners.	Liability Limited Partn	ership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Represe	entative.	•	
All others: Signature of an authorized person.			1.

Page 2 of 2

\$35.00

\$70.00

\$8.75 (Optional) \$8.75 (Optional)

Fees:

Certificate of Conversion:

Certificate of Status:

Fees for Florida Articles of Incorporation: Certified Copy: 23 00T 27 PH 6: 18

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE J The name of the	NAME corporation shall be: \mmEASUR	ABLY MORE INC
	PRINCIPAL OFFICE	1
	Principal street address: 5870 Jun Davis 12d	Mailing address, if different is:
	Parrish Fr 34219	
ARTICLE III The purpose fo	PURPOSE r which the corporation is organized is:	chantable, religious, educational
and s to or under	scientific purposes, incl agnizations that qual Section 50/03 of the	uding the making of distributions lity as exempt aganzations
ARTICLE IV	MANNER OF ELECTION The manner in NO. Pros Le at INITIAL OFFICERS AND/OR DIRECTOR.	which the directors are elected and appointed: Appointed
Name and Title	: NATAUS FRENCH, PRES	ame and Title:
	Parish Fi 34719	address:
Name and Title	: Ben Payne, VP N	arme and Title:
Address	125 Bak Know Cincie A SEBRING TO 33876	Address:
Name and Title	Emily CAMPBELL, SECN	lame and Title:
Address	2730 Adams St A	Address:
	HOLLYWOOD F 33020	

Name and Title:	The state of the s			• •
Address: **RTICLE VI REGISTERED AGENT** The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: NATHLE FLECK H Address: 5890 In DAVIS Ref **POWLS H FL 3 4217 **IRTICLE VII INCORPORATOR** The name and address of the Incorporator is: Name: NATHLE FLECK H Address: 5890 In DAVIS Ref **POWLS H FL 3 4217 **PARTICLE VIII EFFECTIVE DATE: TANJUH FL 34219 **ARTICLE VIII E	ame and Title:		Name and Title:	
Address: RTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: NA TAN E FRENCH Address: DANS H FL 3 421 1 IRTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: NATAN E FRENCH Address: 5870 J in Davis ID Tancish FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: Coptional H FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: Coptional H FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: OPTIONAL) Reflective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing (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 (If an effective date in this block does not meet the applicable statutory filing requirements, this date will not be listed as indecument'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 certificate, I am familiar with and accept the appointment are registered agent and agree to act in this capacity Required Signature of Registered Agent I submit this document and affirm that the faces stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s. 817.155, F.S. A 20 20 20 3 Regulared Signature of Incorporator	ddress		Address:	
Address: RTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: NA TAN E FRENCH Address: DANS H FL 3 421 1 IRTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: NATAN E FRENCH Address: 5870 J in Davis ID Tancish FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: Coptional H FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: Coptional H FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: OPTIONAL) Reflective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing (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 (If an effective date in this block does not meet the applicable statutory filing requirements, this date will not be listed as indecument'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 certificate, I am familiar with and accept the appointment are registered agent and agree to act in this capacity Required Signature of Registered Agent I submit this document and affirm that the faces stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s. 817.155, F.S. A 20 20 20 3 Regulared Signature of Incorporator	_			
Address: RTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: NA TAN E FRENCH Address: DANS H FL 3 421 1 IRTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: NATAN E FRENCH Address: 5870 J in Davis ID Tancish FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: Coptional H FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: Coptional H FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: OPTIONAL) Reflective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing (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 (If an effective date in this block does not meet the applicable statutory filing requirements, this date will not be listed as indecument'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 certificate, I am familiar with and accept the appointment are registered agent and agree to act in this capacity Required Signature of Registered Agent I submit this document and affirm that the faces stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s. 817.155, F.S. A 20 20 20 3 Regulared Signature of Incorporator				
Address: RTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: NA TAN E FRENCH Address: DANS H FL 3 421 1 IRTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: NATAN E FRENCH Address: 5870 J in Davis ID Tancish FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: Coptional H FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: Coptional H FL 3 421 9 ARTICLE VIII EFFECTIVE DATE: OPTIONAL) Reflective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing (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 (If an effective date in this block does not meet the applicable statutory filing requirements, this date will not be listed as indecument'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 certificate, I am familiar with and accept the appointment are registered agent and agree to act in this capacity Required Signature of Registered Agent I submit this document and affirm that the faces stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s. 817.155, F.S. A 20 20 20 3 Regulared Signature of Incorporator				
RTICLE VI REGISTERED AGENT The name and Plorida street address (P.O. Box NOT acceptable) of the registered agent is: Name: NATHIE FRECHE Address: SB3 O J. DAVIS Ref POWSH F. 3421 INCORPORATOR The name and address of the Incorporator is: Name: NATHIE FRECTIVE DATE: TANISH F. 3421 ARTICLE VIII INCORPORATOR Address: 583 O J. m DAVIS LD TANISH F. 3421 ARTICLE VIII FFECTIVE DATE: TO BETT OF THE STATE AND SHAPE ARE ARE ARE ARE ARE ARE ARE ARE ARE AR	ame and Title:		Name and Title:	
RTICLE VI REGISTERED AGENT The name and Plorida street address (P.O. Box NOT acceptable) of the registered agent is: Name: NATHIE FRECHE Address: SB3 O J. DAVIS Ref POWSH F. 3421 INCORPORATOR The name and address of the Incorporator is: Name: NATHIE FRECTIVE DATE: TANISH F. 3421 ARTICLE VIII INCORPORATOR Address: 583 O J. m DAVIS LD TANISH F. 3421 ARTICLE VIII FFECTIVE DATE: TO BETT OF THE STATE AND SHAPE ARE ARE ARE ARE ARE ARE ARE ARE ARE AR	ddress		Address:	
Name: NATAUE FRENCH Address: 5890 J. DANIS Ref POWN H. F. 3421 1 NETICLE VII INCORPORATOR The name and address of the Incorporator is: Name: AATAUE FRENCH Address: 5870 J. DANIS LD TANISH TO 3421 9 ARTICLE VIII EFFECTIVE DATE: Reference date, if other than the date of filing: A66, 2023 (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 (If an effective date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as indecument'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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 10 20 23 Required Signalure of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s.817.155, F.S. 10 20 20 20 3 Registered Signalure of Incorporator Date				·
Name: NATAUE FRENCH Address: 5890 J. DANIS Ref POWN H. F. 3421 1 NETICLE VII INCORPORATOR The name and address of the Incorporator is: Name: AATAUE FRENCH Address: 5870 J. DANIS LD TANISH TO 3421 9 ARTICLE VIII EFFECTIVE DATE: Reference date, if other than the date of filing: A66, 2023 (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 (If an effective date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as indecument'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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 10 20 23 Required Signalure of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s.817.155, F.S. 10 20 20 20 3 Registered Signalure of Incorporator Date				
Name: NATAUE FRENCH Address: 5890 J. DANIS Ref POWN H. F. 3421 1 NETICLE VII INCORPORATOR The name and address of the Incorporator is: Name: AATAUE FRENCH Address: 5870 J. DANIS LD TANISH TO 3421 9 ARTICLE VIII EFFECTIVE DATE: Reference date, if other than the date of filing: A66, 2023 (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 (If an effective date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as indecument'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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 10 20 23 Required Signalure of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s.817.155, F.S. 10 20 20 20 3 Registered Signalure of Incorporator Date			<u> </u>	
Name: NATAUE FRENCH Address: 5890 J. DANIS Ref POWN H. F. 3421 1 NETICLE VII INCORPORATOR The name and address of the Incorporator is: Name: AATAUE FRENCH Address: 5870 J. DANIS LD TANISH TO 3421 9 ARTICLE VIII EFFECTIVE DATE: Reference date, if other than the date of filing: A66, 2023 (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 (If an effective date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as indecument'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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 10 20 23 Required Signalure of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s.817.155, F.S. 10 20 20 20 3 Registered Signalure of Incorporator Date				
Name: NATALIE FRENCH PAULS HE 3 421 1 IRTICLE VII INCORPORATOR The pame and address of the Incorporator is: Name: NATALIE FRENCH Address: 5870 Jim Davis LD PARILLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: A645, 2023 (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 (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 (If an effective date on the Department of State's records. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature of Registered Agent I submit this document and efficie that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s. 817.155, F.S. // 20-20-3 Date Required Signature of Incorporator	RTICLE VI R.	EGISTERED AGEN1 ida street address (P.O. Box NOT a	cceptable) of the registered agent is:	
Address: SBA D Sim DAVIS Ref			•	
RETICLE VII INCORPORATOR The name and address of the Incorporator is: Name: NATAUE Address: 5870 Jim Davis LD 7ARRIH To 34219 4RTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: ACC 2023 (OPTIONAL) (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 (If an effective date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature of Registered Agent I submit this document and offirm that the faces stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s. 817.155, F.S. 10 20 20 20 3 Regulired Signature of Incorporator Date				
TREATICLE VIII INCORPORATOR The pame and address of the Incorporator is: Name: NATALIE TRENCH Address: 5870 Jim Davis LD TARRIH TO 34219 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: ARTICLE VIII EFFECTIVE DATE: OPTIONAL) ARTICLE VIII EFFECTIVE DATE: OPTIONAL) If an effective date, if other than the date of filing: ARTICLE VIII EFFECTIVE DATE: OPTIONAL) Note; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity OPTIONAL) Required Synature of Registered Agent I submit this document and offirm that the facts stated herein are true. I am aware that any false information submitted in a doct the Department of State constitutes a third degree felony as provided for in \$817.155, F.S. 10 20-2023 Required Signature of Incorporator Date	Address:	Para & H &	34219	
The name and address of the Incorporator is: Name: NATALLE TRENCH Address: 5870 Jim Davis LD PARCHH F2 34219 ARTICLE VIII EFFECTIVE DATE: AUG 2023 (OPTIONAL) Effective date, if other than the date of filing: AUG 2023 (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 (If an effective date in street din this block does not meet the applicable statutory filing requirements, this date will not be listed as a 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 certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature of Registered Agent I submit this document and effiring that the facts stated herein are true. I am aware that any false information submitted in a document and efficient that the facts stated herein are true. I am aware that any false information submitted in a document and efficient as third degree felony as provided for in s.817.155, F.S. // 20-20-23 Date Required Signature of Incorporator Date		rwush 1C C	<u> </u>	
The name and address of the Incorporator is: Name: NATALLE TRENCH Address: 5870 Jim Davis LD PARCHH F2 34219 ARTICLE VIII EFFECTIVE DATE: AUG 2023 (OPTIONAL) Effective date, if other than the date of filing: AUG 2023 (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 (If an effective date in street din this block does not meet the applicable statutory filing requirements, this date will not be listed as a 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 certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature of Registered Agent I submit this document and effiring that the facts stated herein are true. I am aware that any false information submitted in a document and efficient that the facts stated herein are true. I am aware that any false information submitted in a document and efficient as third degree felony as provided for in s.817.155, F.S. // 20-20-23 Date Required Signature of Incorporator Date		NCOPPORATOR		
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: ACC 2023 (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 [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 a 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity [10 10 23] Required Signature of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and agree constitutes a third degree felony as provided for in \$817.155, F.S. [10 20 20 20 3] Required Signature of Incorporator Date Required Signature of Incorporator	The name and add	ress of the Incorporator is:		
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: ACC 2023 (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 [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 a 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity [10 10 23] Required Signature of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and agree constitutes a third degree felony as provided for in \$817.155, F.S. [10 20 20 20 3] Required Signature of Incorporator Date Required Signature of Incorporator	Name:	MATALIE FREM	nc #	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: ACC 2023 (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 [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 a 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity [10 10 23] Required Signature of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and agree constitutes a third degree felony as provided for in \$817.155, F.S. [10 20 20 20 3] Required Signature of Incorporator Date Required Signature of Incorporator		5870 Jim DA	NIS <u>P.D</u>	•
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: AUG 2073 (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 a 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity [10 20 23] Required Signature of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document and affirm that the facts stated herein are true. I am aware that any false information are the fall of the false in the facts are the fall of the fall of the false in the false in the	Address:			
Effective date, if other than the date of filing: (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 (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 (If an effective date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s.817.155, F.S. Required Signature of Incorporator Date Required Signature of Incorporator		1914411 12 21		
If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the ining (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the ining (If an effective date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a 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 certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity 10 10 23 Date	ARTICLE VIII	EFFECTIVE DATE:	AGG 2023 (OPTIONAL)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a 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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 10 10 23	Effective date, if of	ther than the date of fitting	fic and cannot be more than five days pri	or or 90 days after the filing.)
Having been named as registered agent to accept service of process for the above stated corporation at the place designated certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 10 10 23			the applicable statutory filing requirements,	, this date will not be listed as the
Having been named as registered agent to accept service of process for the above stated corporation at the place designated certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 10-10-23	Note: If the date	inserted in this block does not meet investigate on the Department of State	s records.	
Required Signature of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in \$.817.155, F.S. 10 20 23 10 20 23 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 20 20 3 20 3 3 20 4 5 20 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6				
Required Signature of Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in \$.817.155, F.S. 10 20 23 10 20 23 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 10 20 20 3 20 20 3 20 3 3 20 4 5 20 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Having been nan	ned as registered agent to accept ser	rvice of process for the above stated corpo	ration at the place designated . his capacity
Required Signature of Registered Agent I submit this document and offirm that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in s.817.155, F.S. Required Signature of Incorporator Date	certificate, I am f	uniliar with and accept the appointm	igni as regular to agent and agent and	_
I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document of State constitutes a third degree felony as provided for in \$.817.155, F.S. 10 20 2023 Required Signature of Incorporator Date		7/		Date
Required Signature of Incorporator 10 20 - 202 3		Required Standaure of Regis	seren Agent	-Committed in a docum
Required Signature of Incorporator 10 20 - 202 3	I submit this docs	ment and affirm that the facts stated	herein are true. I am aware that any faise u	njormation savratica Di G 2002
Required Signature of Incorporator	the Department of	State constitutes a third degree jeto	ny as provincia for all doctors	10.20.2023
1023 UCT 27 PK		70		Date
		Required Signature of	Incorporator	(; <u>153</u>
		(\mathcal{X})		
				· · · · · · · · · · · · · · · · · · ·
				٠
				<u> </u>
The state of the s				