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(Requestor's	s Name)
(Address)	
(Address)	
(City/State/2	Zip/Phone #)
PICK-UP V	VAIT MAIL
(Business E	intity Name)
(Document	Number)
Certified Copies Ce	ertificates of Status
Special Instructions to Filing Of	ficer:
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COVER LETTER

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

UBJECT:		(PROPOSED CORPORA	ATE NAME – <u>MUST INCLI</u>	UDE SUFFIX)	
nclosed are an	origir	nal and one (1) copy of the ar	ticles of incorporation and	a check for:	
□ \$70. Filing F		\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
			ADDITIONAL CO	PPY REQUIRED	
FROM	:	deritage Dr Ste127	e (Printed or typed)	SECRET	
FROM	601F	Nam Heritage Dr Ste127 er, FL 33458	e (Printed or typed) Address , State & Zip	UL 13 HASSI	
FROM	601F	Nam Heritage Dr Ste127 er, FL 33458	Address	SECRETARY OF STATE TALLAHASSEE: FLORIO,	
FROM	601F	Nam Heritage Dr Ste127 er, FL 33458 City 1308-0695	Address	SECRETARY OF STATE TALLAHASSEE: FLORIO,	1

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

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

The name of the corpo	NCIPAL OFFICE Principal street address		Mailing ad	Idress, if different is:
601 Heritage Dr Ste 127	· · · · · · · · · · · · · · · · · · ·	. <u> </u>		
	 	- -	······································	
Jupiter, FL 33458				
ARTICLE III PUR The purpose for which	POSE h the corporation is organized is:	and all lawful	business activity	
ARTICLE IV SHA	RES 10,000,000			
The number of shares ARTICLE V INIT	of stock is:	<u>PRS</u>		2016 JU SECRI
The number of shares ARTICLE V INIT	of stock is: "IAL OFFICERS ANDIOR DIRECTO itle: Kyle Gellis, President	<u>PRS</u> Name ar		I JUL I
The number of shares ARTICLE V INIT	of stock is: CIAL OFFICERS ANDIOR DIRECTO itle: 601 Heritage Dr	<u>PRS</u> Name ar		- SSE - SSE
The number of shares ARTICLE V INIT Name and T	of stock is: CIAL OFFICERS ANDIOR DIRECTO itle: Kyle Gellis, President 601 Heritage Dr Ste 127	<u>PRS</u> Name ar		13 PM 4:
The number of shares ARTICLE V INIT Name and T	of stock is: CIAL OFFICERS ANDIOR DIRECTO itle: 601 Heritage Dr	<u>PRS</u> Name ar		13 PM
The number of shares ARTICLE V INIT Name and Ta Address	of stock is: CIAL OFFICERS ANDIOR DIRECTO itle: Kyle Gellis, President 601 Heritage Dr Ste 127	PRS Name ar Address	<u> </u>	13 PM 4: 35 ARY UF STATE SSEE: FLORICL
The number of shares ARTICLE V INIT Name and Ta Address	of stock is: CIAL OFFICERS ANDIOR DIRECTO itle: Kyle Gellis, President 601 Heritage Dr Ste 127 Jupiter, FL 33458	PRS Name ar Address Name ar	nd Title:	13 PM 4: 35 ARY UF STATE SSEE: FLORICL
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The number of shares ARTICLE V INIT Name and Take Address	of stock is: CIAL OFFICERS ANDIOR DIRECTO Extra Control of the c	Name ar Address Name ar Address Address	nd Title:	13 PM 4: 35 ARY DE STATE SSEE: FLORIGA
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The number of shares ARTICLE V INIT Name and Ta Address Name and Ta Address	of stock is: FIAL OFFICERS ANDIOR DIRECTO itle: Kyle Gellis, President 601 Heritage Dr Ste 127 Jupiter, FL 33458	Name ar Address Name ar Address Name ar Address	nd Title:	13 PM 4: 35 ARY OF STATE SSEE FLORICL

Name	and Title:	Name and Title:	
Addre	ess	Address:	
		 	
	REGISTERED AGENT	-hl-) -fsh	
	Florida street address (P.O. Box NOT accepta Kathleen Gellis	able) of the registered agent is:	7. 2
Name:	601 Heritage Dr Ste 127		2016 JUL 13 SECRETARY
Address:			AHAA
	Jupiter, FL 33458		SSEE
<u>ARTICLE VII</u>	INCORPORATOR		F STA
The <u>name and</u>	address of the Incorporator is:		39
Name:	Kyle Gellis		
Address:	601 Heritage Dr Ste 127		
	Jupiter, FL 33458		
Effective date,	I EFFECTIVE DATE: if other than the date of filing: e date is listed, the date must be specific and filing.)	. (OPTION cannot be more than five bu	
	ate inserted in this block does not meet the appl s effective date on the Department of State's rea		nents, this date will not be listed as
	named as registered agent to accept service of p I am familiar with and accept the appointmen		
Ora	then sell's		7/10/2016
	Required Signature/Registered Age	nt	Date
	locument and affirm that the facts stated here we Department of State constitutes a third degre		
	ye Design		7/10/2016
Red	uired Signature/Incorporator		Date

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