

P18UWW35942

Florida Department of State
Division of Corporations
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Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION HEMP BUNNY INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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APR 20 2018

T. SCOTT

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: HEMP BUNNY INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

1601 SW 14TH AVE1601 SW 14TH AVEBOYTON BEACH FL 33426BOYTON BEACH FL 33426**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: SALE OF MERCHANDISE**ARTICLE IV SHARES**The number of shares of stock is: 100 SHARES @ 1.00 PER VALUE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: PRESIDENT TATIANA LEGRA

Name and Title: _____

Address: 1601 SW 14TH AVE

Address: _____

BOYTON BEACHFL 33426

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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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: TATIANA LEGRA
Address: 1601 SW 14TH AVE
BOYTON BEACH FL 33426

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: TATIANA LEGRA
Address: 1601 SW 14TH AVE
BOYTON BEACH FL 33426

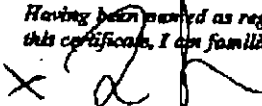
ARTICLE VIII EFFECTIVE DATE: 04/19/2018

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

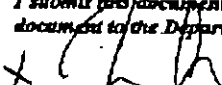
x 

Required Signature/Registered Agent

04/19/2018

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.

x 

Required Signature/Incorporator

04/19/2018

Date

H18000124364