Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353 Phone : (800)221-2972 Fax Number : (888)692-9256

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION

Nationwide Statistical Resources Inc.

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Electronic Filing Menu Corporate Filing Menu

Help

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

TICLE IT FRING	CIPAL OFFICE Principal street address	Mailing address, if d	ifferent is:
138 Via Poinciana, Apt. 314 ake Worth, FL 33467		3138 Via Poinciana, Apt. 314	
		Lake Worth, FL 33467	
TICLE III PURP	OSE the corporation is organized is:	act any and all lawful activity for which a	corporation
y be formed.			
_ 			
TICLE IV SHAR	<u>ES</u> 200		
TICLE IV SHAR number of shares of	ES 200 stock is:		
number of shares of	stock is:		
number of shares of	stock is: AL OFFICERS AND/OR DIRECTORS	Name and Title:	
number of shares of FICLE V INITIA Name and Title	Stock is: AL OFFICERS AND/OR DIRECTORS Billie Phillips - Director 3138 Via Poinciana, Apt. 314	Name and Title:	
number of shares of	Stock is: AL OFFICERS AND/OR DIRECTORS Billie Phillips - Director 3138 Via Poinciana, Apt. 314	Name and Title: Address:	
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Name ar	nd Title:	Name and Title:
Address	s	Address:
		_
ARTICLE VI	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable) o	of the registered agent is:
Name:	BlumbergExcelsior Corporate Services, Inc.	or the registered agent is:
_	155 Office Plaza Drive, 1st Fl.	_
, 1001033.	Tallahassee, FL 32301	_
		_
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	
Name:	Ana Maisonave	_
Address:	16 Court St, 14th Fl	_
	Brooklyn, NY 11241	_
Effective date, if	fother than the date of filing:	ot be more than five days prior or 90 days after the
filing.)	date is listed, the date must be specific and cannot	or the more man five days prior or you days after the
Note: If the date the document's e	e inserted in this block does not meet the applicable effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed a
this certificate, I	med as registered agent to accept service of process am familiar with and accept the appointment as rej ary, Lauren Depass	s for the above stated corporation at the place designated gistered agent and agree to act in this capacity
7331. JEUBI	ary, Lauren Depass	08/09/2018
	Required Signature/Registered Agent	Date
I submit this document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the false information submitted in ny as provided for in s.817.155, F.S.
() ~		08/09/2018
Requ	ired Signature/Incorporator	Date