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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : 120070000160 : (800)494-3124 Phone Fax Number : {305}675-2811

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Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION ALPHA 9 ENTERPRISES, INC 0 Certificate of Status O Certified Copy 03 Page Count \$70.00 Estimated Charge

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

ALPHA 9 ENTERPRISES, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

13014 N DALE MABRY HIGHWAY, STE 818 TAMPA, FLORIDA 33618

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

DIRECTOR, PRESIDENT

DAVID JENAYE

13014 N DALE MABRY HIGHWAY, STE 818-

TAMPA, FLORIDA 33618

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PAGE 2 ALPHA 9 ENTERPRISES, INC

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

DAVID JENAYE 3422 ELLENWOOD LANE TAMPA, FLORIDA 33618

ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

DAVID JENAYE 13014 N DALE MABRY HIGHWAY, STE 818 TAMPA, FLORIDA 33618

4/5/19

Date

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.

4/0

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.