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**Florida Department of State
Division of Corporations
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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
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19 MAY 21 PM 2:35

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

****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
ALEXY FL Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

**C RICO
MAY 21 2019**

2019 MAY 21 PM 10:06

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: ALEXY FL Inc.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

c/o BANYM, Inc. 16850-112 Collins Avenue, #269c/o BANYM, Inc. 16850-112 Collins Avenue, #26Sunny Isles Beach, FL 33160Sunny Isles Beach, FL 33160**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To engage in any lawful act or activity for which corporations may be organized.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Eric Kayser, DirectorName and Title: Johan Pesenti, DirectorAddress: 16850-112 Collins Avenue, #269Address: 16850-112 Collins Avenue, #269Sunny Isles Beach, FL 33160Sunny Isles Beach, FL 33160

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

19 MAY 21 PM 2:35

SECRETARY OF STATE
DIVISION OF CORPORATIONS

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: BANYM, Inc.
 Address: 16850-112 Collins Avenue, #269
Sunny Isles Beach, FL 33160

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Johan Pesenti
 Address: 16850-112 Collins Avenue, #269
Sunny Isles Beach, FL 33160

ARTICLE VIII EFFECTIVE DATE:

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 business days prior or 90 business 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

05/20/19
 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

05.20.2019
 Date

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 19 MAY 21 PM 2:35