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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 : SUPERBIZ.COM, INC.
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (305) 675-2811

****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
E B & E PROPERTIES INC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

J DENNIS

JUN 24 2019

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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:

E B & E PROPERTIES INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5563 BUTTE STREET

LEHIGH ACRES, FLORIDA 33971

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:

PRESIDENT

ELINOR ROGE

5563 BUTTE STREET

LEHIGH ACRES, FLORIDA 33971

19 JUN 21 AM 9:31
ELINOR ROGE
E B & E PROPERTIES INC
LEHIGH ACRES, FLORIDA 33971

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ARTICLE VI REGISTERED AGENT


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

ELINOR ROGE
5563 BUTTE STREET
LEHIGH ACRES, FLORIDA 33971

ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:


ELINOR ROGE
5563 BUTTE STREET
LEHIGH ACRES, FLORIDA 33971



ELINOR ROGE / Registered Agent

6-21-19
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.



ELINOR ROGE /Incorporator

6-21-19
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.

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STATE OF FLORIDA
DEPARTMENT OF STATE