

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
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www.incserv.com
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ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 4/28/2020

PRIORITY Routine

OUR REF # (Order ID#) 824256

ORDER ENTITY
ANDREW FEZZA, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

ANDREW FEZZA, INC. (FL)

File the attached Articles of Merger and subsequent Articles of Incorporation

NOTES:

\$140.00 Authorized (\$70.00 for Merger and \$70.00 for Incorporation) - Please honor the original submission date as the file date.

Email address for annual report reminders: acb@brooks-lawpllc.com

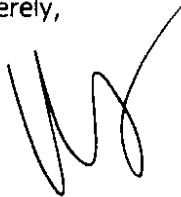
RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

FOURTH: Please check one of the boxes that apply to surviving entity:

- This entity exists before the merger and is a domestic filing entity.
- This entity exists before the merger and is not authorized to transact business in Florida.
- This entity exists before the merger and is a domestic filing entity, and its Articles of Incorporation are being amended as attached.
- This entity is created by the merger and is a domestic corporation, and the Articles of Incorporation are attached.
- This entity is a domestic eligible entity and is not a domestic corporation and is being amended in connection with this merger as attached.
- This entity is a domestic eligible entity being created as a result of the merger. The public organic record of the survivor is attached.
- This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.

FIFTH: Please check one of the boxes that apply to domestic corporations:

- The plan of merger was approved by the shareholders and each separate voting group as required.
- The plan of merger did not require approval by the shareholders.

SIXTH: Please check box below if applicable to foreign corporations

- The participation of the foreign corporation was duly authorized in accordance with the corporation's organic laws.

SEVENTH: Please check box below if applicable to domestic or foreign non corporation(s).

- Participation of the domestic or foreign non corporation(s) was duly authorized in accordance with each of such eligible entity's organic law.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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EIGHTH: If other than the date of filing, the delayed effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:

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.

NINTH: Signature(s) for Each Party:

| Name of Entity/Organization: | Signature(s): | Typed or Printed Name of Individual: |
|------------------------------|---------------------|--------------------------------------|
| Andrew Fezza, Inc. (FLA) | <i>Andrew Fezza</i> | Andrew Fezza |
| Andrew Fezza, Ltd. (CT) | <i>Andrew Fezza</i> | Andrew Fezza |
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|-----------------------------------|--|
| Corporations: | Chairman, Vice Chairman, President or Officer <i>(If no directors selected, signature of incorporator.)</i> |
| General partnerships: | Signature of a general partner or authorized person |
| Florida Limited Partnerships: | Signatures of all general partners |
| Non-Florida Limited Partnerships: | Signature of a general partner |
| Limited Liability Companies: | Signature of an authorized person |

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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: Andrew Fezza, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
8866 North Sea Oaks Way unit #204
Vero Beach, Florida 32963

Mailing address, if different is:
same as principal office

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of Andrew Fezza, Inc. is trademark licensing and design development.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andrew Fezza, President Name and Title: Marilyn Fezza, Vice President
Address 8866 North Sea Oaks Way unit #204 Address: 8866 North Sea Oaks Way unit #204
Vero Beach, Florida 32963 Vero Beach, Florida 32963

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

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

2020 APR 29 AM 8:51
SECRETARY STATE OF FLORIDA

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: Andrew Fezza

Address: 8866 North Sea Oaks Way unit #204

Vero Beach, Florida 32963

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Brooks Law, PLLC

Address: 320 Post Road, Suite 180 - HAYVN

Darien, CT 06820

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 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:

Andrew Fezza 4/28/2020
C6308E667E6D444 Required Signature/Registered Agent 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.

Alexis Brooks 4/28/2020
F43B7B34A0FE43E Required Signature/Incorporator Date