

P20000038839

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

20 MAY 29 AM 10:26

****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
GOLDEN RUN BN, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2020 MAY 29 PM 3:10

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: Golden Run BN, Inc.

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

2200 NE 54th Street

Fort Lauderdale, Florida 33308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose for which the corporation is organized is to engage in any lawful business for which corporations

may be organized under the Florida Business Corporation Act.

ARTICLE IV SHARESThe number of shares of stock is: 1,000 Shares of Common Stock,
\$0.01 par value per share**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Anthony Medardo Palma

Name and Title: (Director/Chairman/CEO/Secretary/Treasurer) Name and Title:

Address 2200 NE 54th Street

Address:

Fort Lauderdale, Florida 33308

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

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DocuSign Envelope ID: 11BDFB28-B8BC-4E8B-96BF-08EE0AC0ECA7

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: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, Florida 32301

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Anthony Medardo Palma

Address: 2200 NE 54th Street

Fort Lauderdale, Florida 33308

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*

Corporation Service Company

By: Ashley Isbert Ashley Isbert, Assistant VP

Required Signature/Registered Agent

5/29/2020

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.*_____
Required Signature/Incorporator

5/29/2020

Date

20 MAY 29 AM 13:26