Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000165019 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page
Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BELOFF LAW, P.A. Account Number : I20080000060 Phone : (305)673-1101 Fax Number : (305)673-5505

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: IDBG belofflaw.com

FLORIDA PROFIT/NON PROFIT CORPORATION BRODSON LUXURY HOMES, INC.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$87.50

Help

DocuSign Envelope ID: C3444B50-35D6-44C8-BD1C-7B30CE98BC79

((((H20000165019 3)))

ARTICLES OF INCORPORATION

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

ARTICLE I The name of		IOMES, INC.			
ARTICLE II —	PRINCIPAL OFFICE Principal street address	N	Mailing address, if different is:		
	STREET, SUITE: 100 ORIDA 33137				
The purpose	II PURPOSE for which the corporation is organized is: CONSTRITION MAY ENGAGE UNDER FLORIDA LAW		y Lawful Business in W	НІСН А	
			<u></u>	1362	
			> }•	MOF 1382	
			(A) 1-	-2	
				-P - X	
			- 100 電子 - 200 -	1 : 34	C
	V SHARES of shares of stock is: 1000 SHARES OF COMMON	STOCK, PER VA	LUE \$.01	•	
ARTICLE 1	V INITIAL OFFICERS AND/OR DIRECTORS				
Name and T	Title: BARRY P. BRODSKY / President/ Director	Name and Title:			
Address	120 NE 27 TH STREET	Address:			
	SUITE: 100				
	MIAMI, FLORIDA 33137				
Nam	ne and Title:	Name and Title	:		

(((H20000165019 3)))

	·-	00165019 3)))	
Addı	····	Address:	
			
Name	and Title:	Name and Title:	
Addı	ress	Address:	
			
Name	and Title:	Name and Title:	
A		A dd	
Addı	ress	Audress:	
			
		<u> </u>	·
	REGISTERED AGENT d Florida street address (P.O. Box NOT	·	
I ha sama as	Triotida street address (F.O. DOX NOT	acceptable) of the registered agent is:	
The <u>name an</u>			<u>⊁</u> 5 2
Name:	BARRY P. BRODSKY		
Name:			
	120 NE 27 TH STREET		
Name:	120 NE 27 TH STREET SUITE: 100		W JUN -
Name:	120 NE 27 TH STREET		SE JUN Z
Name:	120 NE 27 TH STREET SUITE: 100		
Name: Address:	120 NE 27 TH STREET SUITE: 100 MIAMI, FLORIDA 33137		10 m
Name: Address:	120 NE 27 TH STREET SUITE: 100		7 T
Name: Address:	120 NE 27 TH STREET SUITE: 100 MIAMI, FLORIDA 33137		AHASSET

120 NE 27TH STREET

MIAMI, FLORIDA 33137

SUITE: 100

Address:

DocuSign Envelope ID: C3444850-35D6-44C8-BD1

(((H20000165019 3)))

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing:	
(If an effective date is listed, the date must be specific and cannot be more than five d	(OPTIONAL) Bys prior or 90 days after the filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ements, this date will not be listed as the
Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree	
(3) 3	May 20 7070
Required Signantife Registered Agent	Date
I submit this document and affirm that the facts stated herein are true. I am aware that to the Department of State constitutes a third degree felony as provided for in s.817.155,	the false information submitted in a docum F.S.
Occus spreed by:	May 2020
Required Signature/Incorporator	Date

FILED
2020 JUN-2 PH 4: 3