7/23/2020

2020-07-23 13:54:49 CST 16144554862 From: James Tanks III ida Debartment of State **Division of Corporations**

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.

Electronic Filing Cover Sheet

(((H20000240705 3)))



H200002407053ABCU

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 : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

Fax Number : (954)208-0845

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

PMG Services, Inc.

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

J. FASON

JUL 2 4 2020

Electronic Filing Menu

Corporate Filing Menu

Help

To: Page 3 of 4

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

<u>articlei na</u>	ME Seniors Inc.			
The name of the corp	poration shall be: PMG Services, Inc.			
ARTICLE II <u>PR</u>	TICLE II PRINCIPAL OFFICE Principal street address		Mailing address, if different is:	
1301 Concord T	Terrace, Sunnise, FL 33323			
ARTICLE III PU The purpose for wh	RPOSE ich the corporation is organized is: Any and al	l lawful busines	S	
			2020 JUL	
			· 23	
ARTICLE IV SE			AM 10: 07	
<u>ARTICLE V IN</u>	TTIAL OFFICERS AND/OR DIRECTORS		72 9	
Name and	Title: Dominic J Andreano - Director and President	Name and Title	Meredith Longsworth - Secretary	
Address	1301 Concord Terrace	_ Address:	1301 Concord Terrace	
	Sunrise, FL 33323	_	Sunrise, FL 33323	
Name and	Fitle:	- Name and Title	· · · · · · · · · · · · · · · · · · ·	
Address		-		
		_		
Name and 1	Title:	_ Name and Title	2:	
Address		_ Address:		
		- -		

Name an	d Title:	Name and Title:	
Address		Address:	
4 PAMES ASS 12 1 40	DECICTEDED ACCOUNT		
	<u>REGISTERED AGENT</u> lorida street address (P.O. Box NOT acceptable) of t	he registered agent is:	
Name:	CT Corporation System		
Address:	1200 South Pine Island Road		
	Plantation, FL 33324		
ARTICLE VII	INCORPORATOR		_
	Idress of the Incorporator is:		2020
Name:	Leah Cuadra, FRP		. 23
Address:	DLA Piper U.P. US		i i
	200 SBiscayne Blvd., Suite 2500, Miami.	RL 33131	2020 JUL 23 AM 10: 07
ARTICLE VIII	EFFECTIVE DATE:		무를 말
Effective date, if	other than the date of filing:		
(II an effective of filing.)	late is listed, the date must be specific and cannot	be more than tive days prio	r or 90 days after the
	inserted in this block does not meet the applicable s flective date on the Department of State's records.	statutory filing requirements, the	nis date will not be listed as
	ned as registered agent to accept service of process for amiliar with and accept the appointment as registere		
	Karen Spain Assistant Secretary		7/23/2020
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein are t Department of State constitutes a third degree felony		
/s/ Leah Cuad	ra		July 23, 2020
Required Signatu		Date	