

P200000 **65132**
 Florida Department of State
 Division of Corporations
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Email Address: mrosman@rosmanandcompany.com

FLORIDA PROFIT/NON PROFIT CORPORATION
CHRISCON FINANCIAL INC.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CHRISCON FINANCIAL INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**4865 NORTH CLASSICAL BLVD
DELRAY BEACH, FL 33445**

20 AUG 25 PM 3:00
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**NANCY ALARIO
4865 NORTH CLASSICAL BLVD
DELRAY BEACH, FL 33445**

Prepared By:

Bruce B. Hubbard

238 W. Jericho Turnpike
Huntington Sta., NY 11746

1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

- JOSEPH C. ALARIO, DO -1145 WOODBERRY DR, MOUNTAIN TOP, PA 18707- PRES./DIRECTOR
- ROSALIE M. O'MAHONY -11 NAN-TONE CT, COLTS NECK, NJ 07722-VICE PRES./DIRECTOR
- ANDREA F. ZOLA - 249 CHICKADEE CT, FREEHOLD, NJ 07728-SEC./DIRECTOR
- NANCY ALARIO-4865 N. CLASSICAL BLVD., DELRAY BEACH, FL 33445-TREAS./DIRECTOR

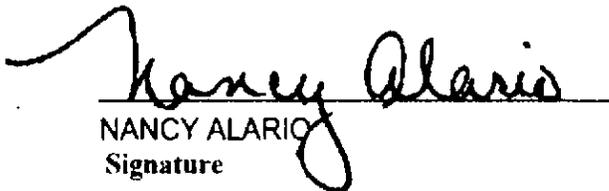
ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

NANCY ALARIO-4865 N. CLASSICAL BLVD., DELRAY BEACH, FL 33445

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

17TH day of AUGUST 2020



 NANCY ALARIO
 Signature

20 AUG 25 PM 3:00
 OFFICE OF THE CLERK
 DIVISION OF CORPORATE STATE REG.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: CHRISCON FINANCIAL INC.

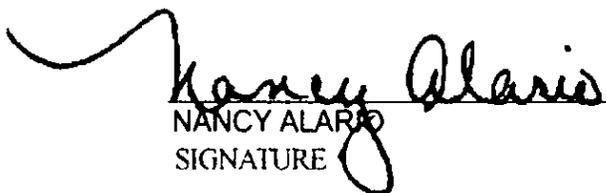
2. The name and address of the registered agent and office is:

NANCY ALARIO
Name

4865 NORTH CLASSICAL BLVD
(P.O. Box or Mail Drop Box NOT Acceptable)

DELRAY BEACH, FL 33445
(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.


NANCY ALARIO
SIGNATURE

8/17/2020
(Date)