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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ARAZOZA & FERNANDEZ-FRAGA P.A.

Account Number : 076624003440

Phone : (305)444-6226

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### FLORIDA PROFIT/NON PROFIT CORPORATION ANTHONY LAURIA P.A.

| Certificate of Status | 1       |
|-----------------------|---------|
| Certified Copy        | 0       |
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| Estimated Charge      | \$78.75 |

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D O'KEEFE SEP 0 4 2020

# ARTICLES OF INCORPORATION OF ANTHONY LAURIA P.A.

The undersigned subscribers to these articles of incorporation hereby associate themselves together to form a corporation under the laws of the State of Florida.

## ARTICLE I

The name of this corporation is ANTHONY LAURIA P.A.

### ARTICLE II GENERAL NATURE OF BUSINESS

The corporation, as principal or otherwise, is organized to buy, sell, exchange, import, lease, let, grant or take license in respect of, improve, develop, repair, maintain, manage or operate real and business property of every kind; and, generally, to do everything suitable, proper and conducive to the conduct of a real estate and asset holding company business in all of its branches and departments.

The corporation may also engage in any activity or business permitted under the laws of the United States and of the State of Florida.

## ARTICLE III CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having a nominal or par value of One (\$1.00) Dollar per share. All said shares shall be payable in cash, property, labor or services at a valuation to be fixed by the Board of Directors at a meeting called for that purpose. Property, labor or services may be purchased or paid for with capital stock at a just valuation to be fixed by the Board of Directors.

#### ARTICLE IV INITIAL CAPITAL

The amount of capital with which this corporation will begin business is not less than \$100.

### ARTICLE V TERM OF EXISTENCE

This corporation is to exist perpetually.

Prepared by:

Carlos F. Arazoza

2100 Salzedo Street, Suite 300 Coral Gables, Florida 33134 Phone: (305) 444-6226 Florida Bar No.0698806 20 SEP -3 PM 7: 47
SECRETARY OF STATE
LATE AND SECRETARY OF STATE.

#### ARTICLE VI ADDRESS

The principal place of business and the mailing address of the corporation in the State of Florida is 6800 VERONESE STREET CORAL GABLES, FL 33146. The Board of Directors may from time to time move the principal office to another address in Florida.

### ARTICLE VII

This corporation shall have not less than one director, however, the number of directors may be increased or diminished from time to time by By-laws adopted by the stockholders, but shall never be less than one.

Name ANTHONY LAURIA Address 6800 VERONESE STREET CORAL GABLES, FL 33146

### ARTICLE IX SUBSCRIBER

The name and post office address of the subscriber of these Articles of Incorporation, the number of shares of stock that he agrees to take and the value of the consideration therefore is:

Name ANTHONY LAURIA Address 6800 VERONESE STREET CORAL GABLES, FL 33146 Shares 100 Consideration

\$100

#### ARTICLE X AMENDMENT

These articles of incorporation may be amended in the manner provided by law. Every amendment shall be approved by the Board of Directors, proposed by them to the Stockholders, and approved at a stockholders' meeting by two thirds of the stock entitled to vote thereon, unless all the directors and all the stockholders sign a written statement manifesting their intention that a certain amendment of these articles of incorporation made.

### ARTICLE XI REGISTERED OFFICE AND REGISTERED AGENT

That ANTHONY LAURIA P.A. desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Incorporation at the City of Miami, County of Dade, State of Florida, hereby designates ANTHONY LAURIA as its Registered Agent, to accept services within the State. The registered office of the corporation shall be 6800 VERONESE STREET CORAL GABLES, FL 33146.

### ARTICLE XII PROFESSIONAL SERVICES

To the extent required by law and the applicable regulations, the professional services of the Corporation shall be rendered only through officers, employees, and agents who shall be properly licensed as required by the State of Florida or any state or local licensing authority, any Federal agency or governing administration, which may by statute, ordinance, rule, regulation or treaty, from time to time, create such requirements. This provision shall not be applicable to the extent it is in conflict with the law or the professional rules of the practice of real estate and asset holding and management company businesses.

| WITNESS the hand and seal of the incorporate | r in Miami-Dade County, | State of Florida, the |
|--|-------------------------|-----------------------|
| day of September, 2020                       | 1                       | Λ                     |

Anthony Lau/i Incorporator

| STATE OF FLORIDA     | )     |
|----------------------|-------|
|                      | ) SS: |
| COUNTY OF MIAMI-DADE | )     |

THE FOREGOING INSTRUMENT was acknowledged before me via X1 physical presence or [ ] electronic appearance on this 3 day of September, 2020, by Anthony Lauria, being personally known to me or having produced a FL- PRIVERY LICEUSE as identification.



[Notary Seal]

Laura Kohn, Netary Public

My Commission Expires: May 16, 2024

20 SEP -3 PM 7: 47
SECRETARY OF STATE

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

#### ANTHONY LAURIA P.A.

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

6800 VERONESE STREET CORAL GABLES, FL 33146

Incorporator

September <u>05</u>, 2020

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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

September 13 . 2020

TP -3 PH 7:1