P20000081313

10/16/2020 Division of Corporations

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 : VCORP SERVICES, LLC
Account Number : I20080000067
Phone : (845)425-0077
Fax Number : (845)818-3588

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

Email Address: _____

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FLORIDA PROFIT/NON PROFIT CORPORATION
Accredited IR, Inc

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$70.00

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OCT 19 2020

Electronic Filing Menu Corporate Filing Menu Help

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 Accredited IR, Inc

ARTICLE II PRINCIPAL OFFICE

Principal Street address
7910 HARBOR ISLAND DRIVE SUITE 1106
Miami FL 33141

Mailing address, if different is:
7910 HARBOR ISLAND DRIVE SUITE 1106
Miami FL 33141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is INVESTOR RELATIONS/MARKETING

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Valerie Emanuel, President
Address: 7910 HARBOR ISLAND DR STE 1106
Miami FL 33141

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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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: Vcorp Services, LLC

Address: 5011 South State Road 7, Suite 106

Davie FL 33314

ARTICLE VII INCORPORATOR

The **name and address** of the incorporator is

Name: Valerie Emanuel

Address 7910 HARBOR ISLAND DRIVE SUITE 1106

Miami FL 33141

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.

_____ 10/16/2020

Required Signature/Registered Agent 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.

_____ 10/16/2020

Required Signature/Incorporator Date