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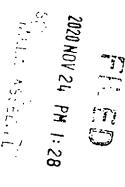


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CORPORATE ACCESS, INC.

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WALK IN

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	CERTIFIED COPY	
хx	РНОТОСОРУ	
	CUS	
хx	FILING	ARTICLES
	KAXLYN, INC.	
	(CORPORATE NAME AND DOCUME	NT #)
•	(CORPORATE NAME AND DOCUME	NT #)
•	(CORPORATE NAME AND DOCUME)	NT #)
•	(CORPORATE NAME AND DOCUME)	NT #)
•	(CORPORATE NAME AND DOCUME)	NT #)
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	(CORPORATE NAME AND DOCUMEN	NT #)
PECIAI NSTRU	L CTIONS:	

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

The name of the corpora	tion shall be: Kaxlyn, Inc.				
ARTICLE II PRINC	CIPAL OFFICE Principal street address		Mailing address, if differen	nt is:	
80 Palm Island V	Way	SAME			
Ponte Vedra, FL	•				
ARTICLE III PURPO The purpose for which t	DSE he corporation is organized is:N	losquito contro	I		
				2020 NOV	
ARTICLE IV SHARE The number of shares of shares	ES stock is: 10,000,000 L OFFICERS AND/OR DIRECTORS			24 PM 1:28	
		Name and Title:	Pres/Treas/Direc	tor	
Address	90 Dalm Jaland Wass	Address:			
Name and Title	Paul McDaniel	Name and Title	VP/Sect/Directo	ır	
Address	80 Palm Island Way	Address:			
Address _		Address:			

Name and 1	itle: Name and Title:	
Address	Address:	
ARTICLE VI RE	GISTERED AGENT da street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	Paul McDaniel	
Address:	80 Palm Island Way	
_	Ponte Vedra, FL 32081	
ARTICLE VII IN	<u>CORPORATOR</u>	
The <u>name and addre</u>	ess of the Incorporator is:	
Name:	Paul McDaniel	
Address:	80 Palm Island Way	
	Ponte Vedra, FL 32081	
APTICLE VIII - EE	SEECTIVE DATE.	
ARTICLE VIII EF Effective date, if other (If an effective date	er than the date of filing: (OPTIONA is listed, the date must be specific and cannot be more than five days	L)
filing.)	as we are the day of specific and cannot be more than live days	brior or so days and
Note: If the date insthe document's effec	erted in this block does not meet the applicable statutory filing requiremetive date on the Department of State's records.	nts, this date will not b
Having been named of certificate, I am fami	is registered agent to accept service of process for the above stated corpora lips with and accept the appointment as registered agent and agree to act i	tion at the place design in this capacity
Hall		11/24/2
	Required Signature/Registered Agent Paul McDaniel	Date
I submit this docume document to the Depo	ent and affirm that the facts stated herein are true. I am aware that the provided for in s.817.1	false information sub
	11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	, - 101