## PUSDSONSON

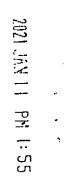
	Requestor's Name)			
(	Address)			
	Address)			
(	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(	Business Entity Name)			
	Document Number)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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## **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	Home360 Concierge Inc		
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of the art	icles of incorporation an	d a check for:
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM: _	Brendan	HALL (Printed or typed)	
_	1317 Edgewater Dr, #3474	Address	
_	Orlando, FL 32804	State & Zip	
_	(S31) 45°C Daytime To	7-6013 elephone number	
_	E-mail address: (to be used		Co //

NOTE: Please provide the original and one copy of the articles.

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

RTICLE II PRING	Principal street address	M	Mailing address, if different is:	
1317 (	dge moter or			· ·
DTICLOUI DUDO	,	7	4 CONSU	Hat
	stock is: $\sqrt{QQQQQQ}$	PRS		2021 JA
ne number of shares of	Stock is:   Q Q O O C	PRS Name and Title:		2021 JAN 1 I
ne number of shares of	Stock is: 100,000 W AL OFFICERS AND/OR DIRECTO EL GRAHAMAN DE	Name and Title:_		2021 JAN 1 1 PF 1
e number of shares of  RTICLE V INITIA  Name and Title	Stock is: 100000	Name and Title:_		
e number of shares of RTICLE V INITIA Name and Title Address	Stock is: 10000 G LOFFICERS AND/OR DIRECTO ELOFFICERS AND/OR DIRECTO STENDON HAL DI Glenthallow Dr Svetz GA	Name and Title:Address:		1: 55
e number of shares of RTICLE V INITIA Name and Title Address	Stock is: 100,000 W LOFFICERS AND/OR DIRECTO STENDON HAP DI Glentallow Dr Svetz GA Hattsu. LLE MY	Name and Title:Address:		
RTICLE V INITIA  Name and Title  Address  Name and Title:  Address	Stock is: 100,000 W LOFFICERS AND/OR DIRECTO STENDON HA DI Glentallow Dr Svetz GA Hattsu. LLE MY	Name and Title:  Address:  Name and Title:  Address:  Address:		T
RTICLE V INITIA  Name and Title  Address  Name and Title:  Address	Stock is: 100,000 W LOFFICERS AND/OR DIRECTO STENDON HAP 21 GRAHAMAN Dr Svetz GA Haftsv. Lúe NY	Name and Title:  Address:  Name and Title:  Name and Title:  Name and Title:		T

Name and T	Title:	Name and Title:	
Address		Address:	
The name and Flori	GISTERED AGENT  da street address (P.O. Box NOT acco	eptable) of the registered agent is:	
Name:		<del></del>	
Address:	Orlando, FL 32804		
<del></del>	CORPORATOR  Ess of the Incorporator is:		2021 JAN
Name:	<del>_</del> •	Home 360 Concinge INC	
Address:	( '1	Hane360 Conciles INC 1801/	PH 1: 55
(If an effective date filing.)  Note: If the date inse	er than the date of filing: is listed, the date must be specific ar	. (OPTIONAL)  not cannot be more than five days prior  pplicable statutory filing requirements, this records.	
this certificate, I am j	familiar with and accept the appointme	of process for the alone that it on process for the alone that and agree to act in	this capacity
4	Required Signature/Registered Ap	yent	12/23/2020 Date
document to the Depo	that the facts stated he	rein are true. I am aware that the false is tree felony as provided for in s.817.155, F.	information submitted in a
Required	Signature/Incorporator		Date (3