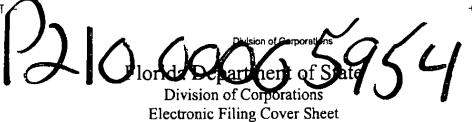
1/28/2021



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(((H210000388663)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

ö

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353 Phone : (800)221-2972 Fax Number : (917)243-5843

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

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION EMPIRE MIAMI 36, INC

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Help

D O'KEEFE JAN 2 3 2221

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

| KIICLEII PRINC | TIPAL OFFICE | Mailing addn | see if different is: |
|---|--|--|--------------------------------|
| Principal <u>street</u> address 3111 North Ocean Ave | | 3111 North Ocea | ess, if different is: n Ave |
| | | • | |
| Hollywood, FL 33019 | | Hollywood, NY 33019 | |
| RTICLE III PURPO he purpose for which to | DSE he corporation is organized is: Luxury | Car Rental | |
| | | | |
| | | | <u> </u> |
| | | | |
| RTICLE IV SIJARI he number of shares of | <u>ES</u> 200 stock is: | | |
| | L OFFICERS AND/OR DIRECTORS | | 21 JA! |
| | L OFFICERS AND/OR DIRECTORS | Name and Title: | 21 JAH 20 |
| RTICLE V INITIA | LOFFICERS AND/OR DIRECTORS Brandon Belmonte - Director | | 21 JAN 23 1 |
| RTICLE V INITIA Name and Title | LOFFICERS AND/OR DIRECTORS Brandon Belmonte - Director | Name and Title: | Υ. |
| RTICLE V INITIA Name and Title | Brandon Belmonte - Director 718 Undercliff Ave | Name and Title: | |
| Name and Title Address | LOFFICERS AND/OR DIRECTORS Brandon Belmonte - Director 718 Undercliff Ave Edgewater, NJ 07020 | Name and Title:Address: | 55. 57. |
| Name and Title Address Name and Title | LOFFICERS AND/OR DIRECTORS Brandon Belmonte - Director 718 Undercliff Ave Edgewater, NJ 07020 | Name and Title: Address: Name and Title: | 5. 5. |
| Name and Title Address | LOFFICERS AND/OR DIRECTORS Brandon Belmonte - Director 718 Undercliff Ave Edgewater, NJ 07020 Valon Hasangjekaj - Director | Name and Title: Address: Name and Title: | 55. 57. |
| Name and Title Address Name and Title | LOFFICERS AND/OR DIRECTORS Brandon Belmonte - Director 718 Undercliff Ave Edgewater, NJ 07020 Valon Hasangjekaj - Director 134 Heights Dr | Name and Title: Address: Name and Title: | 5. 5. 1 10. 1 |
| Name and Title Address Name and Title: Address | LOFFICERS AND/OR DIRECTORS Brandon Belmonte - Director 718 Undercliff Ave Edgewater, NJ 07020 Valon Hasangjekaj - Director 134 Heights Dr | Name and Title: Address: Name and Title: Address: | 55. |
| Name and Title Address Name and Title: Address | Brandon Belmonte - Director 718 Undercliff Ave Edgewater, NJ 07020 Valon Hasangjekaj - Director 134 Heights Dr Yonkers, NY 10710 | Name and Title: Address: Name and Title: Address: | 55. |

| Name ar | nd Title: | Name and Title: | | | | |
|--|--|---|---------------------------|--|--|--|
| Address | | Address: | | | | |
| | | | | | | |
| | | | | | | |
| ARTICLE VI | REGISTERED AGENT | | | | | |
| | lorida street address (P.O. Box NOT acceptable) | of the registered agent is: | | | | |
| Name: | Brandon Belmonte | _ | | | | |
| Address: | 311 North Ocean Ave, Apt 912 | | | | | |
| | Hollywood, FL 33019 | | | | | |
| | | | ± <u>2</u> ≥ 2 | | | |
| ARTICLE VIL | INCORPORATOR | | | | | |
| The name and a | ddress of the Incorporator is: | | | | | |
| Name: | Brandon Belmonte | _ | | | | |
| Address: | 311 North Ocean Ave, Apt 912 | | ့် ဟု | | | |
| | Hollywood, FL 33019 | | | | | |
| Effective date, i | EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and can | | 90 days after the | | | |
| filing.) | | • • | • | | | |
| Note: If the data the document's | e inserted in this block does not meet the applicab effective date on the Department of State's record | ole statutory filing requirements, this da s. | nte will not be listed as | | | |
| Having been na certificate, Lam | ned as registered agent to accept service of process familiar with and agrept the appointment as regist | for the above stated corporation at the tered agent and agree to act in this cap | actly | | | |
| _16_ | 1120 | <u> </u> | 1/28/21 | | | |
| | 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 be partment of State constitutes a third degree felony as provided for in \$.817.155, F.S. | | | | | | |
| 18 |) Bis | | 1/28/21 | | | |
| Required Signati | ure/incorporator | Date | | | | |