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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number >: (516)935-3088

*** RESUBMIT PLEASE FILE WI ORIGINAL SUBMIT DATE, 02/16/2021

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

Email Address: PAULPUNZONE3RDM@GMAIL.COM

FLORIDA PROFIT/NON PROFIT CORPORATION PLATINUM CONTRACTORS NE INC

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

PLATINUM CONTRACTORS NE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

PRINCIPAL OFFICE ADDRESS:
429 SOUTHEAST BANCROFT COURT
PORT ST LUCIE, FL 34984

MAILING ADDRESS: 200 VILLAGE CENTER DRIVE #6141 FREEHOLD, NJ 07728

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 SHARES AT NO PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

PAUL PUNZONE 429 SOUTHEAST BANCROFT COURT PORT ST LUCIE, FL 34984 ZIERREG 16 To 1.21

Prepared By:
Bruce B. Hubbard
238 W. Jericho Turnpike
Huntington Sta., NY 11746
1-516-935-3940

ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

PAUL PUNZONE - PRESIDENT / DIRECTOR 429 SOUTHEAST BANCROFT COURT, PORT ST LUCIE, FL 34984

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

PAUL PUNZONE 429 SOUTHEAST BANCROFT COURT, PORT ST LUCIE, FL 34984

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

12TH day of FEBRUARY 20 21

PAUL PUNZONE

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES. TI UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Pl	LATINUM CONTRACTORS NE INC	
2. The name and address of the registere	ed agent and office is:	
	PAUL PUNZONE	
	Name	
	429 SOUTHEAST BANCROFT COURT	
	(P.O. Box or Mail Drop Box NOT Acceptable)	
	PORT ST LUCIE, FL 34984	
	(City / State / Zip)	

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

FEBRUARY 12, 2021 .

(Date)

SIGNATURE