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2021 MAR 25 PM 3:47

FLORIDA

2021 MAR 25 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP: 3/25 Glinda

☐ **CERTIFIED COPY**

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ARTICLES

1. **EVOLVE 33 INC**

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

FILED

ARTICLES OF INCORPORATION

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

2021 MAR 25 PM 12: 59

ARTICLE I NAME

The name of the corporation shall be: EVOLVE 33 INC

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

17671 N Dale Mabry Hwy, Suite P

18745 Birchwood Groves Dr.

Lutz, FL 33548

Lutz, FL 33558

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Smoke Shop

ARTICLE IV SHARES

The number of shares of stock is: 200 Shares, No par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jay Patel, President

Name and Title: Punit Shah - Vice President

Address 17671 N Dale Mabry Hwy, Suite P
Lutz, FL 33548

Address: 17671 N Dale Mabry Hwy, Suite P
Lutz, FL 33548

Name and Title: Tushar Patel - Secretary

Name and Title: Nirav Patel - Treasurer

Address 17671 N Dale Mabry Hwy, Suite P
Lutz, FL 33548

Address: 17671 N Dale Mabry Hwy, Suite P
Lutz, FL 33548

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FL

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: Jay Patel
Address: 18745 Birchwood Groves Dr.
Lutz, FL 33558

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Jay Patel
Address: 17671 N Dale Mabry Hwy, Suite P
Lutz, FL 33548

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

Jay Patel

03/25/2021

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.

Jay Patel

03/25/2021

Required Signature/Incorporator

Date