P210000 39047

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

Office Use Only



600365521356

05/04/21--01001--007 **70.00

171 HAY -3 ATT 10: 58

2021 MAY - 3 PM 3:57
SECRETARY OF STATE

CORPORATE ACCESS, ____

When you need ACCESS to the world

INC.

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

CUS FILING ARTICLES ZENITH DYAD INC. (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)]	CERTIFIED COPY		
CUS ZENITH DYAD INC. (CORPORATE NAME AND DOCUMENT #)	K	РНОТОСОРУ		
ZENITH DYAD INC. (CORPORATE NAME AND DOCUMENT #)]	CUS		
(CORPORATE NAME AND DOCUMENT #)	ζ.	FILING	ARTICLES	
(CORPORATE NAME AND DOCUMENT #)	Z	ENITH DYAD INC.		
(CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)	((CORPORATE NAME AND DOCU	JMENT #)	
(CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)				
(CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)	((CORPORATE NAME AND DOCL	JMENT #)	
(CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)				
(CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)	(C	CORPORATE NAME AND DOCU	IMENT #)	
(CORPORATE NAME AND DOCUMENT #)				
(CORPORATE NAME AND DOCUMENT #)	(C	ORPORATE NAME AND DOCU	MENT #)	
(CORPORATE NAME AND DOCUMENT #)				·
AL	(C	ORPORATE NAME AND DOCU	MENT #)	
AL				·
	(C	ORPORATE NAME AND DOCU	MENT #)	
	4 T			
		TIONS:		

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

The name of the corporation shall be: Ze	enith Dyad Inc.
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
5300 W. Atlantic Ave S	TE 604
Delray Beach, FL 33484	
A DESIGN DELLE DELEGRACIO	for marketing and consulting
services	
	./
	1921 1AY
ARTICLE IV SHARES The number of shares of stock is: 10,000	۵.
ARTICLE V INITIAL OFFICERS AND/OR DIRE	ECTORS 5
Name and Title: John Robinson	MICA IR Name and Title:
Address 9354 Equus	Circle Address:
Boynton Beach	,FL
233	472
Name and Title:	Name and Title:
Address	
Name and Title:	Name and Title:
Address	Address:

Name a	nd Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT Torida street address (P.O. Box NOT acc	ceptable) of the registered agent is:	
Name:	- Aaron M Cohe	n PA	
Address:	110 Via D'este S	 STF 303	
	Delray Beach, FL	_	
ARTICLE VII	<u>INCORPORATOR</u>		
The <u>name and a</u>	ddress of the Incorporator is:		
Name:	_ John Bobinson		
Address:	9354 Equus Cro	<u>le</u>	
	Boynton Beach, FL	33472	
ARTICLE VIII	EFFECTIVE DATE: f other than the date of filing: MAY	2nd 202 (OPTION	
(If an effective of filing.)	date is listed, the date must be specific	and cannot be more than five da	NAL) lys prior or 90 days afte
_	a language de la selfa Novalla de la companya de la selfa	1. 11	
the document's	e inserted in this block does not meet the effective date on the Department of State	applicable statutory filing require: 's records.	ments, this date will not b
Havine heen nas	med as registered agent to accept service o	f neacess for the above stated co-	onation at the wheel devices
certificate, I am	familiar with and accept the appointment	as registered agent and agree to a	ct in this capacity
	Required Signature/Registered		5/a/a
			Date
I submit this document to the	cument and affirm that the facts stated t Department of State constitutes a third de	herein are true. I am aware that t gree felony as provided for in s.81	the false infor m ation sub 7.155. F.S.
	1000	a yy p-o manager sit atox	- 1 - 1
			<i> </i>