To: 18506176381 From: 12147128131 Date: 05/20/21 Time: 4:06 PM Page: 01/04

5/5/2021

Division of Corporations

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(((H210001820543)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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

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# FLORIDA PROFIT/NON PROFIT CORPORATION

### Harbor Bay Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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## **COVER LETTER**

(((H210001820543)))

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

SUBJECT:	Harbor Bay Inc (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fœ	☑ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED
		e (Printed or typed)	
<u>50</u>	01 NE 31 ST , #905	Address	
	Miami FL 33137 City	State & Zip	<del>.</del>
	305 39968 Daytime T	556 Telephone number	
<del></del>	nbryan2101@gma	ail.com d for future annual report r	notification)

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

To: 18506176381 From: 12147128131 Date: 05/20/21 Time: 4:06 PM Page: 03/04

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## ARTICLES OF INCORPORATION

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

ARTICLE 1 NAME The name of the corpora	tion shall be: <u>Harbor Bay Inc</u> .		
ARTICLE II PRIN	CIPAL OFFICE Principal street address	Mailing	address, if different is:
501 NE 31 ST #905,	Miami FL 33137		
	OSE the corporation is organized is. Impo	•	
ARTICLE IV SHAR The number of shares of ARTICLE V INITE	RES f stock is: 1000 AL OFFICERS AND/OR DIRECTORS		
Name and Titl	c. Bryan Nascimento , CEO	Name and Title:	
Address	501 NE 31 ST, #905	Address:	
	Miami FL 33137	<del></del>	
Name and Title	:	Name and Title:	
Address			
Name and Title	:	Name and Title:	<u> </u>
Address			
			**
			త

To: 18506176381 From: 12147128131 Date: 05/20/21 Time: 4:06 PM Page: 04/04 DocuSign Envelope ID: 64AF9513-91AE-4A47-876B-0B65591B8F82 (((H210001820543))) 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: Bryan Nascimento Name: 501 NE 31 ST ,#905 Address. Miami FL 33137 ARTICLE VII INCORPORATOR The name and address of the Incorporator is. Bryan Nascimento Name: 501 NE 31 ST #905 Address: Miami, FL 33137 ARTICLE VIII EFFECTIVE DATE: (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 Required Signature/Registered Agent 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. Bryan Nascimento Required Signature/Incorporator