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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone Fax Number

: (305)552-5973 : (305)675-5944

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 TRADEX CAPITAL GROUP INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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Corporate Filing Menu

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

TradeX Capital Grou	up INC		
	ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is:		
2950 NE 188th S	St apt 417, Aventura, FL 33180	<u></u>	
ARTICLE III	SHARES: The number of shares of stock is: 100	2021 \$	
ARTICL	E IV INITIAL DIRECTORS AND/OR OFFICERS:	SEP 21	;
RAYM <u>OND BARON</u>		P 21 PH 12: 35	
ARTICLE V	INITIAL REGISTERED AGENT AND STREET ADDR	<u>ress:</u>	
The name and Flo	orida street address (PO Box not acceptable) of the registered	agent is:	
2950 NE 188th St a	pt 417, Aventura, FL 33180 RON		
ARTICLE VI	INCORPORATOR: The name and address of the Incorpo	rator is:	
2950 N <u>E 188th St</u> ap	t 417, Aventura, FL 33180		
RAYMOND	BARON		
		_	

Required Signatures:

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

Ruman	-
	09/20/2021
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.

1ncorporator 09/20/2021/9

Incorporator 09/20/2021/9

PH 12