

Florida Department of State  
 Division of Corporations  
 Electronic Filings

**P21000354396**

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To:

Division of Corporations  
 Fax Number : (850)617-6381

From:

Account Name : TAP SOLUTIONS INC  
 Account Number : I20210000103  
 Phone : (786)615-3057  
 Fax Number : (786)615-3058

2021 SEP 27 AM 9:24

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

2021  
 Email Address: info@tapsolution.net

**FLORIDA PROFIT/NON PROFIT CORPORATION  
 NAYBELT CORP**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$78.75

SEP-28 2021

T. SCOTT

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

**ARTICLE I NAME**The name of the corporation shall be: NAYBELT CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address1801 SOUTH TREASURE DRIVE  
MIAMI BEACH FLORIDA 33141

Mailing address, if different is:

1801 SOUTH TREASURE DRIVE  
MIAMI BEACH FLORIDA 33141**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS ACTIVITY**ARTICLE IV SHARES**The number of shares of stock is: 100% @ 10.00 EACH**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: NATHALY J. BELTRAN SUA/ PRESIDENTAddress 1801 SOUTH TREASURE DRIVE  
MIAMI BEACH FL 33141

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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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: TAP SOLUTIONS INC  
Address: 2341 NW 7TH ST miami fl 33125  
\_\_\_\_\_

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: NATHALY J. BELTRAN SUA  
Address: 1801 SOUTH TREASURE DRIVE  
MIAMI BEACH FL 33141

**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.*

\_\_\_\_\_  
Required Signature/Registered Agent  
09/21/2021  
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.*

\_\_\_\_\_  
Required Signature/Incorporator  
09/21/2021  
Date