

P21000084748

Florida Department of State  
Division of Corporations  
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## To:

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

## From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800)221-2972  
Fax Number : (917)243-5843

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

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

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TALLAHASSEE, FL

## FLORIDA PROFIT/NON PROFIT CORPORATION

## Eight Thirteen PM Inc

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

2021 SEP 28 PM 3:49

**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: Eight Thirteen PM Inc**ARTICLE II PRINCIPAL OFFICE**Principal **street** address

Mailing address, if different is:

6240 S. Martindale AveTampa, FL 33611**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: LOGISTICS; TRANSPORT OF GOODS**ARTICLE IV SHARES**The number of shares of stock is: 200**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: MAKIS DENIS, DIRECTOR

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

Address 6240 S. MARTINDALE AVE

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

TAMPA, FL 33611

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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: MAKIS DENIS  
 Address: 6240 S. MARTINDALE AVE  
TAMPA, FL 33611

**ARTICLE VII INCORPORATOR**

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

Name: STEPHAN MONEREAU  
 Address: 100 WALL STREET, STE 503  
NEW YORK, NY 10005

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**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 Date 09/28/2021

*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 Date 09/28/2021