

P21000092374
 Florida Department of State
 Division of Corporations
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To:

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

From:

Account Name : HUBCO
 Account Number : 104662003400
 Phone : (516)935-3940
 Fax Number : (516)935-3088

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

MICHELLEN@SANDSNCOMPANYCPAS.COM
 Email Address: _____

2021 OCT 25 AM 10:08

**FLORIDA PROFIT/NON PROFIT CORPORATION
 EXPERTPEO INC**

Certificate of Status	1
Certified Copy	0
Page Count	03
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OCT 26 2021

T. SCOTT

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Corporate Filing Menu

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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: EXPERTPEO INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
801 S. OLIVE AVE., APT 706
WEST PALM BEACH, FL 33401

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LEGAL OR LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 1,500 SHARES AT NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KEVIN DOLPH - PRESIDENT Name and Title: _____

Address 801 S. OLIVE AVE., APT 706 Address: _____
WEST PALM BEACH, FL 33401

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: KEVIN DOLPH

Address: 801 S. OLIVE AVE., APT 706

WEST PALM BEACH, FL 33401

ARTICLE VII INCORPORATOR

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

Name: KEVIN DOLPH

Address: 801 S. OLIVE AVE., APT 706

WEST PALM BEACH, FL 33401

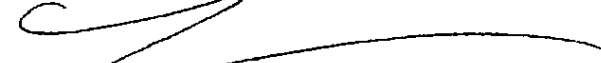
ARTICLE VIII EFFECTIVE DATE:

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

	<u>OCTOBER 25, 2021</u>
Required Signature/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.

	<u>OCTOBER 25, 2021</u>
Required Signature/Incorporator	Date

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