

P21000097485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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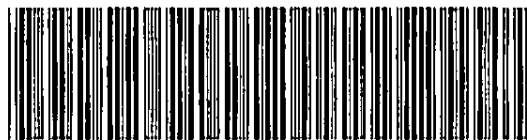
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

C

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: Paladin Management Group, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9424 Baymeadows Rd. ste 250  
Jacksonville, FL 32256

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: management

ARTICLE IV SHARES

The number of shares of stock is: 25,000 of no (\$), par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Titarisha Champion CEO/Dic. Name and Title: \_\_\_\_\_

Address 9424 Baymeadows Rd. ste 250 Address: \_\_\_\_\_

Jacksonville, FL 32256 \_\_\_\_\_

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

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

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

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

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TALLAHASSEE, FL

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: Titarisha Champion

Address: 9424 Baymeadows Rd. ste. 250  
Jacksonville, FL 32256

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Titarisha Champion

Address: 9424 Baymeadows Rd. ste. 250  
Jacksonville, FL 32256

**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

11/03/21  
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

11/03/21  
Date

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