1/5/22, 9:02 AM

# Division of Corporations

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FILINGS, INC. Account Number : 072720000101 Phone : (954)791-2100

Fax Number : (954)583-4117

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### FLORIDA PROFIT/NON PROFIT CORPORATION STORY. 7. CORP.

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## ARTICLES OF INCORPORATION STORY 7, CORP.

THE UNDERSIGNED SUBSCRIBER TO THESE ARTICLES OF INCORPORATION, A NATURAL PERSON COMPETENT TO CONTRACT. HEREBY ORGANISES AND INCORPORATES A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA,

#### ARTICLE I. NAME

AND NAME OF THE ORGANIZATION IS STORY, CORP.

#### ARTICLE II PRINCIPLE ADDRESS

AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

1257 SW Martin Highway Palm City Florida 34991

#### ARTICLE III. PURPOSE

THIS CORPORATION MAY ENGAGE IN THE TRANSACTION OF ANY OR ALL LAWFULL BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE FLORIDA GENERAL CORPORATION ACT,

#### ARTICLE IV- CAPITAL STOCK

THE MAXIMUM NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUHTORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS 100 SHARES OF COMMON STOCK HAVING NOMINAL OR PAR VALUE OF \$1.00 PER SHARE.

#### ARTICLE V- INITIAL REGISTERED OFFICE AND AGENT

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE IF THIS CORPORATION IS 1257 SW MARTIN HIGHWAY, PALM CITY FLORIDA 34991 AND THE NAME OF THE INITIAL REGISTERED AGENT OF THIS CORPORATION AT THE ADDRESS IS MONICA B.MIRANDA.

#### ARTICLE VI- INITIAL BOARD OF DIRECTORS

THE CORPORATION SHALL HAVE INITIALLY HAVE FOUR DIRECTORS TO HOLD OFFICE UNTIL THE FIRST ANNUAL MEETING OF STOCKHOLDERS AND HIS SUCCESSOR SHALL HAVE BEEN DULY EXECUTED AND QUALIFIED, OR UNTIL HIS EARLIER RESIGNATION, REMOVAL FROM OFFICE OR DEATH. THE NUMBER OF DIRECTORS MAY BE EITHER INCREASED OR DECREASED FROM TIME TO TIME IN ACCORDANCE WITH THE BY-LAWS OF THE CORPORATION. THE NAME AND ADRESS OF THE INITIAL DIRECTORS IS:

PRESIDENT – MONICA B. MIRANDA P.O. BOX 2539

PALM CITY, FLORIDA 34991

VICE-PRESIDENT- MONICA B. MIRANDA P.O. BOX 2539

PALM CITY, FLORIDA 34991

SECRETARY – MONICA B. MIRANDA P.O. BOX 2539

PALM CITY, FLORIDA 34991

TREASURER – MONICA B. MIRANDA P.O. BOX 2539

PALM CITY, FLORIDA 34991

#### ARTICLE VII. INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR SIGNING THESE ARTICLE IS:

MONICA B. MIRANDA 1257 SW Martin Highway Palm City Florida 34991

#### ARTICLE VIII. PRE-EMPTIVE RIGHTS

EVERY SHAREHOLDER, UPON THE SALE FOR CASH OF ANY NEW STOCK OF THIS CORPORATION SHALL HAVE THE RIGHT TO PURCHASE HIS PRORATA SHARE THEREOF (AS NEARLY AS MAY BE DONE WITHOUT ISSUANCE OF FRACTIONAL SHARES) AT THE PRICE AT PRICE AT WHICH IS OFFERED TO OTHERS.

#### ARTICLE IX. INDEMNIFICATION

THE CORPORATION SHALL INDEMNIFY ANY OFFICERS, OR ANY FORMER OFFICER OR DIRECTOR, TO THE FULL EXTENT PERMITTED BY LAW.

THESE ARTICLES OF INCORPORATION MAY BE AMENDED IN THE MANNER PROVIDED BY LAW. EVERY AMENDMENT SHALL BE APPROVED BY THE BOARD OF DIRECTORS, PROPOSED BY IT TO THIS STOCKHOLDERS AND APPROVED AT THE STOCKHOLDERS MEETING BY A MAJORITY OF THE STOCK ENTITLED TO VOTE THEREON; UNLESS ALL THE DIRECTORS AND ALL THE STOCKHOLDERS SIGN A WRITTEN STATEMENT MANIFESTING THEIR INTENTION THAT A CERTAIN AMENDMENT OF THESE ARTICLES OF INCORPORATION BE MADE

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION ON THE DATE OF SIGNING.

DATED: December 29, 2021

BY: MONICA B. MIRANDA INCORPORATOR

/S/ Monica B. Miranda INCORPORATOR

#### ARTICLE X. AMENDMENTS

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WTIH SECTION 307.0501, FLORIDA STATUTES, THE FOLLOWING IS SUBMITED:

FIRST THAT TEREO ASSOCIATION INVESTMENT HOLDINGS, INC.

H22000005215

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, HAS NAMED MADELINE BORRERO, 2255 SE VETERANS MEMORIAL PKWAY; PORT SAINT LUCIE, FLORIDA 34952, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

DATED: December 29, 2021

/S/Monica B. Miranda MONICA B. MIRANDA

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THE CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL THE STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

DATE: December 29, 2021

MONICA B. MIRANDA

/S/ Monica B. Miranda

'-6381 1/12/2022 10:55:43 AM PAGE 1/001 Fax Server



January 12, 2022

FLORIDA DEPARTMENT OF STATE Division of Corporations 2ND REJECT

FILINGS, INC.

SUBJECT: STORY, CORP. REF: W22000001324

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The document must contain both the street address of the principal office and the mailing address of the entity.

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DANIEL L O'KEEFE Regulatory Specialist II

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