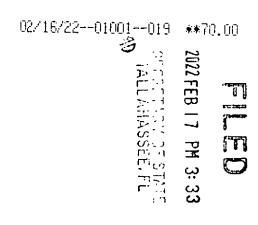
P220000 11759

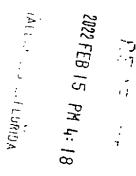
(Re	equestor's Name)	<u> </u>
	idress)	-
(nu	laress)	
(Ad	ldress)	
/Cit	ty/State/Zip/Phone #)	
(0).	.,, otato, 2. pri 110110 #/	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fili	ing Officer:	
W22-18688	-	





200381842462





CORPORATE ACCESS, _____

When you need ACCESS to the world

INC.

1.

2.

3.

5.

6.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 2/15 **DANNY CERTIFIED COPY** $\mathbf{X}\mathbf{X}$ **PHOTOCOPY CUS** XX **FILING** INC EGB HOLDINGS INC (CORPORATE NAME AND DOCUMENT #) **SPECIAL INSTRUCTIONS:**

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

The name of the corporat	tion shall be: Mean the Dream	Согр.	
RTICLE II PRINC	Principal street address	Mailing a	ddress, if different is:
151 SOUTHEA	ST 15TH RD #1101		
MIAMI, FL 3	3132		
IRTICLE III PURPO The purpose for which the	OSE he corporation is organized is: Any la	wful purpose	
The number of shares of	<u>ES</u> stock is: 200		FEB 17 POTARY ALLAHAS
IRTICLE V INITIA	L OFFICERS AND/OR DIRECTORS		SCO TO MEN THE
Name and Title	PAULO FOGACA- PRESIDENT	Name and Title:	
Address	151 SE 15th RD	Address:	ω, ω
	#1101		
	MIAMI, FL 33132		
Name and Title:		_ Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address			

Name and	Title:	Name and Title:	
Address		Address:	–
ARTICLE VI RI The name and Flor	EGISTERED AGENT ida street address (P.O. Box NOT acceptable) c	of the registered agent is:	
Name:	PAULO FOGACA	_	
Address:	151 SOUTHEAST 15TH RD #1101	_ .	
-	MIAMI, FL 33132	_	
ARTICLE VII IN	CORPORATOR		
The name and addi	ress of the Incorporator is:		
Name:	PAULO FOGACA	_	
Address:	151 SOUTHEAST 15TH RD #1101	_	
	MIAMI, FL 33132		
Effective date, if oth	FFECTIVE DATE: ner than the date of filing: e is listed, the date must be specific and cannot	. (OPTIONAL) of be more than five days prior or 90 days after the	he
Note: If the date in the document's effective for the document's effective for the form of	serted in this block does not meet the applicable ctive date on the Department of State's records.	e statutory filing requirements, this date will not be li	isted as
Having been named certificate, I am fum	sliar with and accept the appointment as register	for the above stated corporation at the place designate red agent and agree to act in this capacity	ed in this
- Paul	a jagara	02/17/2022	
	Required Signature/Registered Agent	Date	
I Submit this docum document to the Dep	nent and affirm that the facts stated herein are partment of State constitutes a third degree felon	true. I am aware that the false information submit by as provided for in s.817.155, F.S.	tted in a
+ aula	rocaea	02/17/2022	
required Signature/	Incorporator -	Date	