Division of Corporations Electronic Filing Cover Sheet

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

From:
 Account Name : PREMIER ADVISORY GROUP INC
 Account Number : I20200000085
 Phone : (305)370-9567
 Fax Number : (305)675-0551

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

Email Address:
 TOPLINA DIPOPELT/NON DEPOPELT CORPORATION: DEP

FLORIDA PROFIT/NON PROFIT CORPORATION LUZYSAL DESIGNS & MAS CORP

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

416

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

| RTICLE II PRI | | Mailineada | lress, if different is: |
|---------------------------------|--|--|--------------------------------|
| Principal <u>street</u> address | | wannigade | |
| ISSIMMEE, FL 34746 | | | |
| <u> </u> | | | |
| RTICLE III PUR | POSE h the corporation is organized is: TO DES | SIGN AND SALE PROM | MOTIONAL ITEMS |
| he purpose for which | n the corporation is organized is: 1000 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
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| | | | 20 TA |
| RTICLE IV SHA | IRES | | 1982 MA SECKI ALLAL |
| ne number of snares | of stock is: | | 2022 MAR SECRENT TALLAHA |
| RTICLE V INT | TIAL OFFICERS AND/OR DIRECTORS | | SSE SSE |
| Name and T | itle: SENCION M. FIGUEROA | Name and Title: | PMII: OF STA E, FLOR |
| Address | PRESIDENT | Address: | PATE OR D |
| | 289 SCOTT BLVD | | 0. 0. |
| | KISSIMMEE, FL 34746 | | |
| Vame and Ti | de: | Name and Title: | |
| | | Address: | |
| Address | | Audress: | |
| | | _ | |
| | | | |
| | | | |
| Name and Ti | tle: | Name and Title: | |
| Name and Ti Address | tle: | | |

13056750551

From: Premier Advisory Group Inc.

| Name and | Title: | Name and Title: |
|---|--|---|
| Address | | Address: |
| | | |
| | | |
| The name and Flo | <u>PEGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) o | fthe registered agent is: |
| Name: | PREMIER ADVISORY GROUP INC | - |
| Address: | 8300 W FLAGLER ST STE 254-E | _ |
| | MIAMI, FL 33144 | _ |
| ARTICLE VII | NCORPORATOR | PILED 2022 MAR II PMII: SLUKE WARY OF STA TALLAHASSEE, FLOR |
| The name and ad | dress of the incorporator is: | HAR I |
| Name: | GUILLERMO CASTILLA-ROSELL | SEE C |
| Address: | 8300 W FLAGLER ST STE 254-E | PR [|
| | MIAMI, FL 33144 | IAIE ORIO. |
| Effective date, if | EFFECTIVE DATE: 03/06/2022 other than the date of filing: 05/06/2022 ate is listed, the date must be specific and cann | (OPTIONAL) ot be more than five days prior or 90 days after the |
| | inserted in this block does not meet the applicable Tective date on the Department of State's records | e statutory filing requirements, this date will not be listed as |
| Having heen nam certificate, I am fi | uniliar with and accept the appointment as registe | for the above stated corporation at the place designated in this red agent and agree to act in this capacity |
| | J-top | 3/10/2022 |
| | Required Signature/Registered Agent | Date |
| I submit this doc document to the L | ument and affirm that the facts stated herein are Department of State constitutes a third degree feloi | e true. I am aware that the false information submitted in c ny as provided for in s.817.155, F.S. |
| | A Till | 3/11/2022 |
| Required Signatu | re/Incorporator | Date |