

P22000021834

(Requestor's Name)

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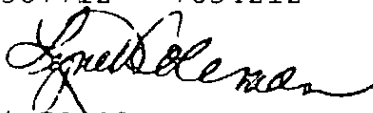
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CLERK OF STATE
TALLAHASSEE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 567712 7634212

AUTHORIZATION : 
COST LIMIT : \$ 70.00

ORDER DATE : March 23, 2022

ORDER TIME : 9:24 AM

ORDER NO. : 567712-005

CUSTOMER NO: 7634212

DOMESTIC FILING

NAME: GREENVILLE GROUP ASSETS INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: _____

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: GREENVILLE GROUP ASSETS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
40 SW 13th Street Suite 802
Miami, Florida 33130

Mailing address, if different is:
40 SW 13th Street Suite 802
Miami, Florida 33130

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any lawful purpose

ARTICLE IV SHARES

The number of shares of stock is: 1,000 shares of \$1.00 par value each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joao Delarisce - Director/President Name and Title: _____

Address 40 SW 13th Street Suite 802 Address: _____
Miami, Florida 33130

Name and Title: Marcia Nascimento Delarisce - Director/Secretary Name and Title: _____

Address 40 SW 13th Street Suite 802 Address: _____
Miami, Florida 33130

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: Dymax International Services Inc.

Address: 40 SW 13th Street Suite 802

Miami, Florida 33130

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joao Delarisse

Address: 40 SW 13th Street Suite 802

Miami, Florida 33130

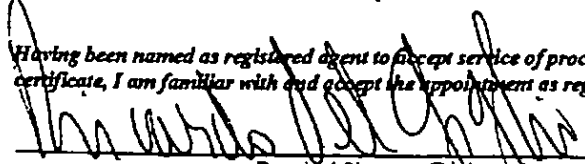
ARTICLE VIII EFFECTIVE DATE:

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

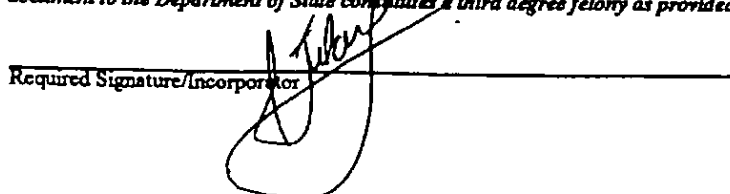


Required Signature/Registered Agent

03/21/2022

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.817.153, F.S.



Required Signature/Incorporator

03/21/2022

Date

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