

P220000 22425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

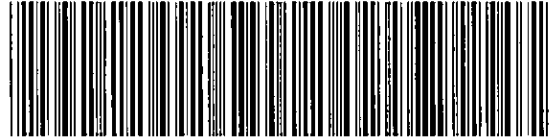
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 MAR 24 PM 3:59

SENDER'S OFFICE

ALLAHASSEE, FL

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

ACCOUNT NO. : I20000000195

REFERENCE : 569118 83810A

AUTHORIZATION :



COST LIMIT : \$ 70.00

ORDER DATE : March 23, 2022

ORDER TIME : 9:55 PM

ORDER NO. : 569118-005

CUSTOMER NO: 83810A

DOMESTIC FILING

NAME: CHABANEL FLORIDA PORTFOLIO
INVESTMENTS 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: Chabanel Florida Portfolio Investments Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
4651 Sheridan Street, Suite 200
Hollywood, FL 33021

Mailing address, if different is:

225 Chabanel Street West, Suite 1107
Montreal, Quebec, Canada H2N 2C9

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____
for the purpose of engaging in any activities or business permitted under the laws of the United States and Florida

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PST Georges Dayan
Address: 3940 Chemin de la Cote-des-Neiges
#B83
Montreal, Quebec, Canada H3H 1W2

Name and Title: _____

Address: _____

Name and Title: VP David Dayan
Address: 400 Richmond Street, Apt. 700
Montreal, Quebec, Canada H3J 1V1

Name and Title: _____

Address: _____

Name and Title: _____
Address: _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
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: JeffreyFeinberg

Address: 4651 Sheridan Street, Suite 200

Hollywood, FL 33021

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jeffrey Feinberg

Address: 4651 Sheridan Street, Suite 200

Hollywood, FL 33021


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 3/21/2022. (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.)

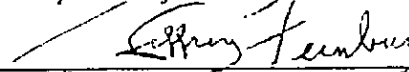
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

3/23/2022
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.817.155, F.S.


Required Signature/Incorporator

3/23/2022
Date