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Florida Department of State  
Division of Corporations  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
UNITED PROPERTY USA GROUP, INC**

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S. CHATHAM

MAR 31 2022

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## **AFFIDAVIT**

BEFORE ME, the undersigned authority, on this day personally appeared **GABRIEL RAMIREZ**, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **UNITED PROPERTY USA GROUP, INC.**, a Florida corporation to be filed with the Florida Department of State on or about **March 31, 2022**.
2. The undersigned hereby consents to and authorizes the use by **UNITED PROPERTY USA GROUP, INC.** of the name **UNITED PROPERTY USA GROUP, INC.**
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.


FURTHER AFFIANT SAYETH NAUGHT.

  
\_\_\_\_\_  
**GABRIEL RAMIREZ**

STATE OF FLORIDA            )  
  ) SS:  
COUNTY OF MIAMI-DADE )

PERSONALLY appeared before me, Gabriel Ramirez, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 31<sup>st</sup> day of March 2022.

  
Giancarlo Caro  
Comm.: HH 200740  
Expires: Nov. 21, 2025  
Notary Public - State of Florida  
Notary Public Signature

**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: UNITED PROPERTY USA GROUP INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

250 NW 23RD ST UNIT 404  
MIAMI FL 33127

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Gabriel Ramirez (P)

Address: 250 NW 23RD ST  
UNIT 404  
MIAMI FL 33127

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE, FL 32301

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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: Gabriel Ramirez  
 Address: 250 NW 23RD ST UNIT 404  
MIAMI FL 33127

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 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Gabriel Ramirez  
 Address: 250 NW 23RD ST UNIT 404  
MIAMI FL 33127

**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

3/31/22  
 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

3/31/22  
 Date