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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043 Phone : (800)342-9856 Fax Number : (800)354-3381

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## FLORIDA PROFIT/NON PROFIT CORPORATION

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## GEALD WEINBERGO 1449603) ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

No. 1639 P. 2/3

TICLE II PRIN	Principal street address	Mailing add	ress, if different is:
123 LINNEAL BEACH DRIVE POPKA, FLORIDA 32703		APOPKA, FLORIDA 32703	
TICLE III PURP	OSE the corporation is organized is: ANY AND	ALL LAWFUL BUSIN	IESS
			2027
TICLE IV SHAF e number of shares of TICLE V INITI	LES f stock is: 200 AL OFFICERS AND/OR DIRECTORS		2022 APR 21 PM
	e: ALFONSO FIERO, P	Name and Title:	- 7 13
Address	6123 LINNEAL BEACH DRIVE	Address:	0 1 5 E
	APOPKA, FLORIDA 32703		
Name and Title	*	Name and Title:	
Address		Address:	
			· · · · · · · · · · · · · · · · · · ·
Name and Titl	e:		

1110

Name aı	nd Title:	Name and Title:
Addres		Address:
	<i>REGISTERED AGENT</i> lorida street address (P.O. Box NOT acceptable) o	of the registered agent is:
Name:	ALFONSO FIERO	the registered agent is:
Address:	6123 LINNEAL BEACH DRIVE	PR
	APOPKA, FLORIDA 32703	- PI
ARTICLE VII	<u>INCORPORATOR</u>	PH 3: 56
The name and a	ddress of the Incorporator is:	E. 6
Name:	LAWRENCE A. KIRSCH	_
Address:	90 STATE STREET, SUITE 601	
	ALBANY, NEW YORK 12207	_
Effective date, if (If an effective filing.)  Note: If the date		ot be more than five days prior or 90 days after the e statutory filing requirements, this date will not be lister
Having been na	ned as registered agent to accept service of process familiar with and accept the appointment as registe	for the above stated corporation at the place designated in
17.	Required Signature/Registered Agent	Date
I submit this do	cument and affirm that the facts stated herein are Department of State constitutes a third degree felor	e true. I am aware that the false information submitted ny as provided for in s.817.155, F.S.
MOCHANICA TO DIC	Lamena a Kisch	