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SECRETARY OF STATE
TALLAHASSEE, FL

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2022 MAY -6 PM 3:09
DIVISION DEPRISENCE

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv^o

ORDER FORM

FROM

Tip Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST	D 4 TE 1	F 10 10000
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PRIORITY Regular Approval

OUR REF # (Order ID#) 1033911

ORDER ENTITY

PAINT AMONG THE PALMS, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

PAINT AMONG THE PALMS, INC. (FL)

Please file the attached articles and provide a certified copy.

NOTES:

\$78.75 Authorized

Email address for annual report reminders: josh@pearceshambach.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, May 6, 2022 Page 1 of 1

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.8. (Profit)

The name of the corporat	ion shall be: Paint Among the Palms,	Inc.		
<u>ARTICLE II PRINC</u> 15334 Cortez Blvd Brooksville, FL 34	Principal <u>street</u> address	500 We Austin	Mailing address. est 2nd Stree TX 78701	if different is: t, Suite 1900
	DSE to engage he corporation is organized is:			ty
Corporation Act				SEC SE
				ECRE TALL
				AH.
				ASS. A.
				SEE. F
				<u>F</u>
Name and Title	Nicole Carruthers, President, Secretary 500 West 2nd Street, Suite 1900	Name and Title		ruthers, Treasure
Address		Address:		
	Austin, TX 78701		Austin, TX 7	8701
Name and Title:	Joshua Pearce, Vice President	Name and Title	<u> </u>	
Address	500 West 2nd Street, Suite 1900	Address:		
	Austin, TX 78701			
Name and Title:		Name and Title	ri	
Address		Address:		

Name a	nd Title:	Name and Title:
Addres		Address:
		
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Incorporating Services, Ltd.	
Address:	1540 Glenway Drive	S S
	Tallahassee, FL 32301	Z HALL
ARTICLE VII	<u>INCORPORATOR</u>	SEURETARY OF STATE TALLAHASSEE, FL
		SSE 3
_	address of the Incorporator is: Joshua Pearce	mo e
Name:	500 West 2nd Street, Suite 1900	
Address:	Austin, TX 78701	
ARTICLE VIII Effective date, i	fother than the date of filing: 05/05/2022	(OPTIONAL)
(If an effective filing.)	date is listed, the date must be specific and canno	t be more than five days prior or 90 days after th
L	te inserted in this block does not meet the applicable	statutory filing requirements, this data will not be li
	effective date on the Department of State's records.	statutory ming requirements, this date will not be in
Having been na	med as registered agent to accept service of process for	r the above stated corporation at the place designate
Cernylcule, I am	familiar with and accept the appointment as registere	
Y KJES	Required Signature/Registered Agent	5/6/2022 Date
	ocument and affirm that the facts stated herein are	
- I submit this do		та с ит итис тисте зиме туттини мити
I submit this do document to the	Department of State constitutes a third degree felony	as provided for in s.817.155, F.S.