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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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2072 MAY 26 PM 12: 44
SECRETARY OF STATE

RECEIVED

2022 MAY 26 PM 2: 59

Incorporating Services, Ltd.

incserv

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 5/26/2022

PRIORITY Regular Approval

OUR REF_#_(Order_ID#) 1039939

ORDER ENTITY_

ZYSCOVICH HOLDINGS INC.

								 	 	
P	LEASE	PERFOR	RM THE	FOLL	OWING	SERVI	CES:	 ·	 	
	ZYSCO	DVICH H	OLDING	GS INC	. (FL)					

Please file the attached articles and provide a certified copy.

NOTES:_____

\$78.75 Authorized

Email address for annual report reminders: john.crivelli@lexiumlegal.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.

Thursday, May 26, 2022 Page 1 of 1

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

The name of the corporat	ion shall be: ZYSCOVICH HOLI	DINGS INC	D	
ARTICLE II PRINC			Mailing address, if different	is:
100 N. BISCAYNE BOULEVARD	, 27TH FLOOR	_ 		
MIAMI, FL 331	32			
ARTICLE III PURPO The purpose for which the	OSE he corporation is organized is:			
ALL LAWFUL	PURPOSES		ECF TAL	2022
		-	A T	
****			HAS	20
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				<u>\$</u>
			, <u>C.</u>	_ :
· · · · · · · · · · · · · · · · · · ·	LOFFICERS AND/OR DIRECTORS BERNARD ZYSCOVICH, P&D 100 N. BISCAYNE BLVD. 27TH FLOOR MIAMI, FL 33132		MARIO SUARE 100 N. BISCAYN 27TH FLOOR MIAMI, FL 3313	IE BLVD.
Name and Title	JOSE MURGUIDO, VP	Name and Title		
Address	100 N. BISCAYNE BLVD.		•	
Addiess	27TH FLOOR	. Address.		
	MIAMI, FL 33132			
Name and Title:		Name and Title	:	
Address	- <u></u>	_ Address:		
		•		

ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Incorporating Services, Ltd. Address: 1540 Glenway Drive Tallahassee, FL 32301 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Bernard Zyscovich Address: 100 N. BISCAYNE BLVD., 27th Floord Miami, Florida 33132 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:	Name a	nd Title:	Name and Title:	
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Address: 100 N. BISCAYNE BLVD., 27th Floord Miami, Florida 33132	The name and a			
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ARTICLE VIII _EFFECTIVE DATE: Effective date, if other than the date of filing:	Address:	100 N. BISCAYNE BLVD., 27th Floord		
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filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	Effective date, i	f other than the date of filing:		
		date is listed, the date must be specific and canno	t be more than five days	prior or 90 days after
	Note: If the dat	e inserted in this block does not meet the applicable	statutory filing requiremen	nts, this date will not be
	the document's	effective date on the Department of State's records.		
	certificate, I am	familiar with und accept (he appointment as registers	ed agent and agree to act in	n this capacity
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	VHE	USSAH Y/Dreuk	, 	5/26/
Aelissa A. Moreur 5/26/	<i>' </i>			/ Date ²
Helissa A. Moreum 5736/ Required Signature/Registered Agent 5736/				
Aelissa A. Moreur 5/26/		Mu		
Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are true. I am aware that the false information submits the state of the state of the submits and the false information submits a submit this document and affirm that the facts stated herein are true. I am aware that the false information submits a submit this document and affirm that the facts stated herein are true.	- And			05/25/2022