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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for fulfure annual report mailings. Enter only one email address please \*\*

Email Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION Fishhawk Elite Corp

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D. O'KEEFE JUN - 1 2022

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

ARTICLE I NAME The name of the corpora	Ention shall be: Fishhawk Elite Corp	p	
ARTICLE II PRINCIPAL OFFICE Principal street address 5904 Flatwood Manor Cir Lithia FL 33547		Mailing address, if different is: 5904 Flatwood Manor Cir Lithia FL 33547	
ARTICLE III PURP The purpose for which	OSE the corporation is organized is: Any la	wful purpose	
			2022 MAY 3) PM L
ARTICLE IV SHAR The number of shares o	f stock is: 500		FLORIDA
	AL OFFICERS AND/OR DIRECTORS  le: Yelena Minitser, DP	Name and Title:	
Address	7901 4th St N STE 300	Address:	
	St. Petersburg, FL 33702		
Name and Title	Esther Minitser, DS	Name and Title:	
Address		Address:	
	St. Petersburg, FL 33702		
Name and Title	: Josh Chavol, DT		
Address	7901 4th St N STE 300	Address:	
	St. Petersburg, FL 33702	<del></del>	
			<u></u>

Name a	nd Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Registered Agents Inc.	<del></del>	
Address:	7901 4th St N STE 300		
	St. Petersburg, FL 33702	_	PILLED  2022 MAY 31 PM 4: 31  SELING JANY OF STATE TALLAHASSEE, FLORIDA
ARTICLE VII	<u>INCORPORATOR</u>		MAY 31 PI
The name and a	address of the Incorporator is:		SEC P
Name:	Riley Park		FEST C
Address:	7901 4th St N STE 300		r: 31 DRID
	St. Petersburg, FL 33702		; <del>-</del>
Effective date, i (If an effective filing.)  Note: If the date	EFFECTIVE DATE:  f other than the date of filing: date is listed, the date must be specific and ca le inserted in this block does not meet the applica effective date on the Department of State's recor	nnot be more than five days pri	
	med as registered agent to accept service of proce familiar with and accept the appointment as regi		his capacity
<del></del>	Required Signature/Registered Agent	****	5/30/22 Date
	ocument and affirm that the facts stated herein Department of State constitutes a third degree fe		lse information submitted in a F.S.
Required Signat	Rilay Tak	Date	e <u>5/30/22</u>
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