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Florida Department of State  
Division of Corporations  
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CORPORATIONS  
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SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION  
MAGENTA KEY CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
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ALL INFORMATION FILED  
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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: **MAGENTA KEY CORP**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

11690 SW 25TH ST  
DAVIE, FL-33325

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **SMALL BUSINESS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 1.00@100 par value

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

Name and Title: **RAUL REMIGI - PRESIDENT**

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

Address: **11690 SW 25TH ST**  
**DAVIE, FL-33325**

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

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

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

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

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

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

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

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

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

2022 JUN -3 PM 2:05  
CALLUM MORGAN, FL

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: RAUL REMIGI  
 Address: 11690 SW 25TH ST  
DAVIE, FL-33325

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: RAUL REMIGI  
 Address: 11690 SW 25TH ST  
DAVIE, FL-33325

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 06/02/2022 (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*

*Raul Remigi*  
 Required Signature/Registered Agent

6/2/22  
 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.*

*Raul Remigi*  
 Required Signature/Incorporator

6/2/22  
 Date

2022 JUN -3 PM 10:05  
 ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED