

P22000047917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

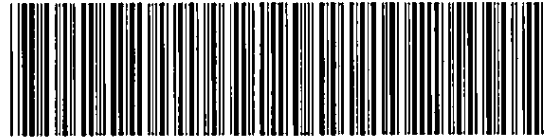
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

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CLERK OF SUPERIOR COURT  
TALLAHASSEE, FL

# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724

Date: 06/13/2022

Acc#I20160000072

*en: c DW*

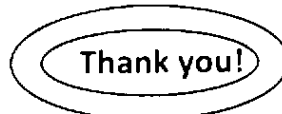
Name:	Keel Brand Corp.
Document #:	
Order #:	14381880

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
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Verifier _____
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Amount: \$ 78.75



## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** Keel Brand Corp.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☒ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Matthew Cohen  
Name (Printed or typed)  
3406 SW 26th Terrace, Suite C-1  
Address  
Fort Lauderdale, FL 33312  
City, State & Zip  
(954) 842-4989  
Daytime Telephone number  
matt.cohen@floragrowth.com  
E-mail address: (to be used for future annual report notification)

**NOTE:** Please provide the original and one copy of the articles.

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: Keel Brand Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address  
3406 SW 26th Terrace, Suite C-1  
Fort Lauderdale, FL 33312

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporation Act, provided that the corporation is not formed to engage in any act or activity requiring the consent or approval of any state official, department, board, agency or other body without such consent or approval first being obtained.

ARTICLE IV SHARES

The number of shares of stock is: 100 shares, \$0.001 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Choe, President

Address: 3406 SW 26th Terrace, Suite C-1  
Fort Lauderdale, FL 33312

Name and Title: Garrett Potter, Vice President

Address: 3406 SW 26th Terrace, Suite C-1  
Fort Lauderdale, FL 33312

Name and Title: Matthew Cohen, Vice President

Address: 3406 SW 26th Terrace, Suite C-1  
Fort Lauderdale, FL 33312

Name and Title: Lisa Goble, Vice President

Address: 3406 SW 26th Terrace, Suite C-1  
Fort Lauderdale, FL 33312

Name and Title:

Address:

Name and Title:

Address:

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CLERK OF CIRCUIT  
TALLAHASSEE, 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: C T Corporation System  
Address: 1200 South Pine Island Road Plantation,  
FL 33324

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Rebecca DiStefano  
Address: 401 E Las Olas Blvd. Ste 2000  
Fort Lauderdale, FL 33301

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TALLAHASSEE, FL

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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*

By: C T Corporation System /s/ Olga Hinkel, VP 06/10/22  
\_\_\_\_\_  
Required Signature/Registered Agent 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.*

/s/ Rebecca DiStefano 06/10/2022  
\_\_\_\_\_  
Required Signature/Incorporator Date