

PA2000049274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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*[Handwritten signature]*

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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: Elements Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

400 NE 12th Ave  
Fort Lauderdale FL 33301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Commercial property  
purchase & holding

ARTICLE IV SHARES

The number of shares of stock is: 30,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Caitlin Watts

Name and Title: Elizabeth Shurak

Address: 631 NE 8th Ave  
Fort Lauderdale, FL 33304

Address: 4213 NW 49th Dr  
Tamara, FL 33319

Name and Title: ESzter Higgins

Name and Title:

Address: 400 NE 12th Ave  
Fort Lauderdale FL 33301

Address:

Name and Title:

Name and Title:

Address:

Address:

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Eszter Higgins  
Address: 400 NE 12th Ave  
Fort Lauderdale FL 33301

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Eszter Higgins  
Address: 400 NE 12th Ave  
Fort Lauderdale, FL 33301

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 5/18/22 (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*

  
Required Signature/Registered Agent

5/18/22  
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.*

  
Required Signature/Incorporator

5/18/22  
Date

5/21/22 11:12:52