Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

Email Address:___

FLORIDA PROFIT/NON PROFIT CORPORATION EXTREME GOLF CART OF FLORIDA INC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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Corporate Filing Menu

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

	XTREME GOLF CART OF FLORIDA	
	ARTICLE II PRINCIPAL OFF	<u>ice:</u>
r	he principal street address and mailing a	address is:
<u> </u>	11057 SW 152 COURT	
	MIAMI FL 33196	
 		
RTICLE III	SHARES: The number of shares of stoc	k is: <u>100</u>
ADTICLE	IV INITIAL DIRECTORS AND	AAD ARVICERS.
ANIMA	JUAN JOUBERT - PRES	NAME OF TAXABLE PARTY.
*	JUAN JOUDERT - PRES	
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		12-
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		i.
• •	INITIAL REGISTERED AGENT AN	
	JUAN JOUBERT	
	11057 SW 152 COURT	
·	MIAMI, FL 33196	<u> </u>
		•
ARTICLEVI	INCORPORATOR: The name and ad	ldress of the Incorporator
	JUAN JOUBERT	
	11057 SW 152 COURT	
	MIAMI, FL 33196	

Required Signatures:

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

K		
	· · · · · · · · · · · · · · · · · · ·	06/21/2322
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.

	06/21/2022
Incorporator	Date

2022 JUN 21 PM 1: 23