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Florida Department of State  
Division of Corporations  
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From:

Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516)935-3940  
Fax Number : (516)935-3088

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

Email Address: GABRIELKNIGHT1@YMAIL.COM

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
ELECTRONIC FILING

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FLORIDA PROFIT/NON PROFIT CORPORATION  
BKC MIA INC

Certificate of Status	1
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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: BKC MIA INC

**ARTICLE II PRINCIPAL OFFICE**

Principal <u>street</u> address	Mailing address, if different is:
<u>11320 NW 7th Avenue</u>	<u></u>
<u>Miami, FL 33168</u>	<u></u>
<u></u>	<u></u>

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any Legal or Lawful Purpose

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CLERK OF CIRCUIT COURT  
MIAMI COUNTY, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is: 100 at No Par Value

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

Name and Title: <u>Gabriel Meyer Knight - President/Director</u>	Name and Title: <u>Sean Joseph Tucker - Vice President/Director</u>
Address: <u>9900 W Bay Harbor Drive 6</u>	Address: <u>19305 NE 18th Court</u>
<u>Bay Harbor Islands, FL 33154</u>	<u>North Miami Beach, FL 33179</u>
<u></u>	<u></u>

Name and Title: <u></u>	Name and Title: <u></u>
Address: <u></u>	Address: <u></u>
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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

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

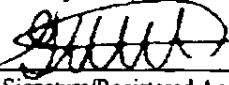
**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Gabriel Meyer KnightAddress: 9900 W Bay Harbor Drive 6Bay Harbor Islands, FL 33154**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Gabriel Meyer KnightAddress: 9900 W Bay Harbor Drive 6Bay Harbor Islands, FL 33154

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 ALABAMA SECRETARY

**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*
  
 \_\_\_\_\_  
 Required Signature/Registered Agent

July 13, 2022

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

July 13, 2022

Date

H22000243380