

8/15/22, 4:17 PM

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : INTERSTATE FILINGS LLC  
Account Number : 120110000086  
Phone : (718)569-2703  
Fax Number : (718)504-7890

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

Email Address: ORDERS@INTERSTATEFILINGS.COM

## FLORIDA PROFIT/NON PROFIT CORPORATION THIRTY THREE POINT THREE CO.

Certificate of Status	0
Certified Copy	0
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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:

THIRTY THREE POINT THREE CO.

ARTICLE II PRINCIPAL OFFICE

Principal street address

205 SEAWANE PLACE

HEWLETT, NY 11557

Mailing address, if different is:

205 SEAWANE PLACE

HEWLETT, NY 11557

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is:

100

DANIEL SILBER - 34 SHARES | KARA BEIRBRIER - 33 SHARES | ESTHER BERG - 33 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DANIEL SILBER, PRESIDENT

Name and Title:

Address

205 SEAWANE PLACE

Address:

HEWLETT, NY 11557

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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(cont.)

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: INTERSTATE AGENT SERVICES, LLC

Address: 100 SE 2ND STREET, SUITE 2000 #209

MIAMI, FL 33131

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: DANIEL SILBER

Address: 205 SEAWANE PLACE

HEWLETT, NY 11557

*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*

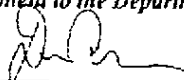


Required Signature/Registered Agent

6/21/2022

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

6/21/2022

Date

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