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## **COVER LETTER**

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

SUBJECT: Carbon	Assets II Corp. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
⊠ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
	evin A. Denti, Esqui Nam 180 Immokalee Road -	e (Printed or typed)	
		Address	
<u>_ N</u>	aples, Florida 34110 City	, State & Zip	
_2	39-260-8111 Daytime 7	Telephone number	
<u>.</u> .k	denti@dentilaw.com E-mail address: (to be use	d for future annual report r	notification)

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

# CORPORATE ACCESS, \_\_\_\_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

### WALK IN

			V	VALN	. 111				
		PICK U	P:	9/22	DANNY				
	XX	CERTIFIED COPY PHOTOCOPY CUS							
	XX	FILING	INC						
1.		CARBON ASSETS II COI							
2.		(CORPORATE NAME AND DOCUMEN	VT #)					<b></b> .	
3.		(CORPORATE NAME AND DOCUMEN	IT #)						
4.		(CORPORATE NAME AND DOCUMEN	VT #)		···	<del></del>			
5.		(CORPORATE NAME AND DOCUMEN	IT #)	· · · · · · · · · · · · · · · · · · ·					
6.		(CORPORATE NAME AND DOCUMEN					,		
	CCIA) TRU	I. CTIONS:							

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

RTICLE I NAME ne name of the corporat	ion shall be: Carbon Assets II Corp.		
RTICLEII PRINC 838 Tamiami Trail aples, Florida 34	Principal <u>street</u> address North - Suite #416	3838 Ta	Mailing address, if different is: miami Trail North - Suite #416 Florida 34103
RTICLE III PURPO ne purpose for which the	OSE  ne corporation is organized is:toenga	nge_in_all	lawful businesses
	authori	zed by Floi	cida law.
			22 97 37 67 67 67 67 67 67 67 67 67 67 67 67 67
		Name and Title	Ralon R. Cioffi, Jr., Director
Address	1457 Anhinga Foint Naples, Florida 34105	Address:	1457 Anhinga Point Naples, Florida 34105
Name and Title:	Ralph R. Cioffi, Jr., Secretary  1457 Anhinga Point  Naples, Florida 34105	Name and Title:	Ralph R. Cioffi, Jr., Treasure  1457 Anhinga Point  Naples, Florida 34105
Name and Title:	Glenn Edwards, Vice President 50 Broadway		Glenn Edwards, Director 50 Broadway
	Lymbrook, New York 11563		Lynbrock, New York 11563

Address	1945 Tarpon Road	Address:	1945 Tarpon Road
radics	Naples, Florida 34102	rudicss.	Naples, Florida 34100
	REGISTERED AGENT  orida street address (P.O. Box NOT acceptable	e) of the registered :	avent is:
Name:	Kevin A. Denti, Esquire		<b>450111 13</b> .
Address:	2180 Immokalee Road-Suite	<u>#</u> 316	
	Naples, Florida 34110		N N S
<u>ARTICLE VII</u>	INCORPORATOR		SEP 22
The <u>name and ac</u>	Idress of the Incorporator is:		PH
Name:	<u>Kevin A. Denti, Esquire</u>	<del></del>	ယ့
Address:	2180 Immokalee Road-Sui	<u>te</u> #316	19
	Naples, Florida 34110		
Effective date, if (If an effective diling.)  Note: If the date	other than the date of filing:  atc is listed, the date must be specific and cal inserted in this block does not meet the application of State's reconstruction.	nnot be more tha able statutory filing	n five days prior or 90 days after t
	ned as registered agent to accept service of proce		
	Required Signature/Registered Agent		Date Date
	ument and affirm that the facts stated herein Department of State constitutes a third degree fo		
1/1	1. Ott.		9/21/20
Required Signatu	re/Incorporator		Date