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FLORIDA PROFIT/NON PROFIT CORPORATION BARBARA C. POZO, P.A.

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D. O'KEEFE OCT 1 2 2022

To:

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

	Enation shall be: BARBARA C. POZC		
ATICLE II PRINCIPAL OFFICE Principal street address 667 NW 50th STREET IAMI, FL 33166		Mailing addr 7667 NW 50th STR MIAMI, FL 33166	ess, if different is:
FICLE III PURI purpose for which	POSE n the corporation is organized is: The na	ature of business is: Real	Estate Associate
FICLE IV SHAL number of shares o	<i>RES</i> of stock is: SHARES: 100 @ \$1.0	0	22 OCT 11
	<i>IAL OFFICERS AND/OR DIRECTORS</i> tle: BARBARA C. POZO - P		AM IO: 1 FELFLOR
	No: BARBARA C. POZO - P	Name and Title: Address:	AMIO F.F.Lo
Name and Tit	7667 NW 50th STREET	Name and Title:Address:	
Name and Tit	tic: BARBARA C. POZO - P 7667 NW 50th STREET MIAMI, FL 33166	Name and Title: Address: Name and Title:	
Name and Titl Address Name and Titl Address	the: BARBARA C. POZO - P 7667 NW 50th STREET MIAMI, FL 33166	Name and Title: Address: Name and Title: Address:	

Name ar	nd Title:	Name and Title:			_
Address	S	Address:			
					_
					_
	REGISTERED AGENT lorida street address (P.O. Box NOT accepta	ble) of the registered agent is:			
Name:	BARBARA C. POZO	, , ,			
Address:	7667 NW 50th STREET		114] امرا	2022	
	MIAMI, FL 33166		AHA Vyr.	2022 OCT 11	
			JALL AHASSET	=	
ARTICLE VII	INCORPORATOR			<u> </u>	
The name and a	ddress of the Incorporator is:		013	AM 10: 5	
Name:	BARBARA C. POZO		87 67	 	
Address:	7667 NW 50th STREET		••		
	MIAMI, FL 33166				
Effective date, if	_EFFECTIVE DATE: fother than the date of filing; date is listed, the date must be specific and	. (OPTIONAL) cannot be more than five days prior o	r 90 days afte	er the	
	e inserted in this block does not meet the apple effective date on the Department of State's rea		date will not	be listea	l as
	ned as registered agent to accept service of pro familiar with and accept the appointment as r			nated in	this
BARBRA C.P.					
BARBRA C POZO (Oct 10,)	१९११: १४४ र छ। Required Signature/Registered Ager	nt	Date		
	cument and affirm that the facts stated here Department of State constitutes a third degree			bmitted	in a
BARBRA C PO	0 <u>70</u>	· · · · · · · · · · · · · · · · · · ·			
Required Signati		Date			_