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(Requestor's Name)

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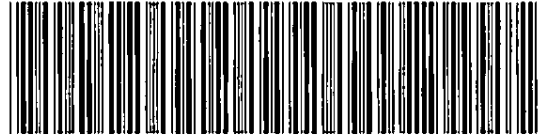
(Business Entity Name)

(Document Number)

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OCT 13 2022

10/13/22--01001--011 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
OCT 12 PM 3:00

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OCT 12 PM 3:38
FALLAHASSEE, FL

COVER LETTER

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

SUBJECT: MSCI Harbour Holdings, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Joseph P. Klapholz, P.A.
Name (Printed or typed)

7951 SW 6th Street Suite 210
Address

Plantation, Florida 33324
City, State & Zip

954-925-3355 x135
Daytime Telephone number

jklap@klapholzpa.com
E-mail address: (to be used for future annual report notification)

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

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

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

PICK UP: DANNY 10/12

CERTIFIED COPY

XX

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XX

FILING

INC

1. **MSCI HARBOUR HOLDINGS, INC**

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

File 1st

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

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: MSCI Harbour Holdings, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
7951 SW 6th Street Suite 210
Plantation, Florida 33324

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Holding Company, and all permitted
legal activity and purposes

ARTICLE IV SHARES

The number of shares of stock is: 100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 OCT 12 PM 3:09

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: Joseph Klapholz, Esquire
Address: 7951 S.W. 6th Street Suite 210
Plantation, Florida 33324

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Joseph P. Klapholz, Esquire
Address: 7951 S.W. 6th Street Suite 210
Plantation, Florida 33324

22 OCT 12 PM 3:10
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

Joseph Klapholz
Required Signature Registered Agent

10/12/2022
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.

Joseph Klapholz
Required Signature Incorporator

10/12/2022
Date