

10/13/22, 4:06 PM

Division of Corporations

P22000078379

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000352467 3)))



H220003524673ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

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

From:

Account Name : FILE IT USA INC.
Account Number : I20190000121
Phone : (718)925-2025
Fax Number : (718)925-2027

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

Email Address: service@fileitusa.com

FLORIDA PROFIT/NON PROFIT CORPORATION
Three Pillar Property Management Corp

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

2022 OCT 13 PM 4:44

D. O'KEEFE

OCT 14 2022

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

((H22000352467 3)))

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: Three Pillar Property Management Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

221 Main Street Suite 2039

Los Altos, CA 94023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Property Management

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Daniel Weisfield, President

Name and Title: Stephanie Colley, Secretary

Address 221 Main Street Suite 2039

Address: 221 Main Street Suite 2039

Los Altos, CA 94023

Los Altos, CA 94023

Name and Title: Yoel Kelman, President

Name and Title: _____

Address 221 Main Street Suite 2039

Address: _____

Los Altos, CA 94023

Name and Title: Michael Skoczylas, Treasurer

Name and Title: _____

Address 221 Main Street Suite 2039

Address: _____

Los Altos, CA 94023

((H22000352467 3)))

(((H22000352467 3)))

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: Michael Skoczylas

Address: 4141 N. 38th Ave

Hollywood, FL 33021

ARTICLE VII INCORPORATOR

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

Name: Stephanie Colley

Address: 221 Main Street Suite 2039

Los Altos, CA 94023

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

/s/ Michael Skoczylas

Required Signature/Registered Agent

10/13/2022

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.

/s/ Stephanie Colley

Required Signature/Incorporator

10/13/2022

Date

(((H22000352467 3)))