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FLORIDA PROFIT/NON PROFIT CORPORATION SHREDFORCE.COM INC

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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: SHREDFORCE.COM INC

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, it different is:

....

8004 NW 154 ST APT 376

MIAMI LAKES, FL 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: \_\_\_\_\_ANY AND ALL LAWFUL BUSINESS

<u>ARTICLE IV SHARES</u>

The number of shares of stock is: 100 

Name and Title	SEA WALL INVESTMENTS CORP - P	_ Name and Title:	
Address	8004 NW 154 ST APT 376		<u> </u>
	MIAMI LAKES, FL 33016		
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Name and Title:		Name and Title:	
Address		Address:	
			 - <b>.</b>
Name and Title:		Name and Title:	 <b></b> .
Address		Address:	 

Name and Title:		Name and Title:		
Address		Address:		
	<u> </u>	<u></u>		
	<u>REGISTERED AGENT</u> <u>Torida street address</u> (P.O. Box NOT accept	able) of the registered agent is:		
Name:	JORGE L. VELAZQUEZ			
Address:	8004 NW 154 ST APT 376			
	MIAMI LAKES, FL 33016			
ARTICLE VII_INCORPORATOR			र्ग २३३ अन्यत्वे - द	
The name and address of the Incorporator is:				
Name:	JORGE L. VELAZQUEZ			
Address:	8004 NW 154 ST APT 376			
	MIAMI LAKES, FL 33016		ŝ	

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

laugues Oct 14, 202152570.0

Required Signature/Registered Agent

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

Date