# P2200008029 ļ

(Requestor's Name)
(Requestors Marile)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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S. CHATHAM OCT 2 1 2022



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#### COVER LETTER

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

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SUBJECT: POST PLATE USA INC. INCLUDE SUFFIX)

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

1 \$70.00 Filing Fee

\$78.75
 Filing Fee
 & Certificate of Status

Name (Printed or typed) FROM: W. Prospect boad auderdale FL City, State & Zip Ft. 566-8512 Davime Telephone num address: (to be used for future annual report notification) E-mail add

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

### Incorporating Services, Ltd.

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1540 Glenway Drive Tallahassee, FL 32301 850.656.7956 Fax: 850.656.7953 www.incserv.com e-mail: accounting@incserv.com

incserv<sup>∽</sup>

#### ORDER FORM

FROM

 Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051 Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 10/20/2022 PRIOF

**PRIORITY** Regular Approval

OUR REF # (Order ID#) 1081306

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#### ORDER ENTITY\_ POST PRINT USA, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

POST PRINT USA, INC. (FL)

Please file the attached articles and provide a certified copy.

**NOTES:** \$78.75 Authorized

#### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I2005000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 624, F.S. (Profit)

ARTICLE I NAMI The name of the corpor	ation shall be: POST Print	USA	Inc.		
ARTICLEII PRIN 10625 SW Miami, FL	<u>CIPAL OFFICE</u> Principal <u>street</u> address		Mailing address, if diffe	rent is:	
<u>ARTICLE III PURP</u> The purpose for which 	the corporation is organized is: <u>Post</u>	print:	g Compar Paper be	ny 29.5	
					r ILEL
<u>ARTICLE IV SHAR</u> The number of shares of	ES stock is:O			9:38	_
ARTICLE V INITI	AL OFFICERS AND/OR DIRECTORS		The Sole	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	>
Name and Titl Address	«Balph Decz-CEO 10625 SW 89th Ct Miomi, FL 33176	<ul> <li>Name and Title</li> <li>Address;</li> </ul>	10625 SW miami, FL		
Name and Title	Michael Droz - President	Name and Title			
Address	i i ar a santh as	_ Address: -			
	Anwar Rajab-CFO	Name and Title			
Address	10625 50 89th CT Miami, FL 33176				

Name	and Title:	Name and Title:		
Address		Address:		
		···		
<u>ARTICLE VI</u> The <u>name and</u>	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) of	f the registered agent is:		
Name:	Joel Marcus			
Address:	676 W. Prospect Rd	<u>-</u>		
	Ft. Landerdale, FL 33309	_	<b>N</b> - 1 <sup>-1</sup>	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		ervision 22 OCI	
The <u>name and</u>	address of the Incorporator is:		20	
Name:	Balph Droz	-		
Address:	10625 560 89th (+	-	9: 200 9: 200 9: 200	
	miami, FL 33176	_	38 38	

<u>ARTICLE VIII EFFECTIVE DATE:</u> 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

Required Signature/Registered Agent

10/19/22 Date

10HS

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.

grature/Incorport

Date 10/19/2022