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SECRETARY OF STATE DIVISION OF CORPORATE DIVISION OF CORPORATE

2022 DEU 15 AMT1: 5

CORPORATE ACCESS, _____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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	CERTIFIED COP	Y	 	
X	РНОТОСОРУ		 	
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	ACH ON THE BOORPORATE NAME AND			
(C	ORPORATE NAME AND	DOCUMENT #)		
(C	ORPORATE NAME AND	DOCUMENT #)	***************************************	
(C	ORPORATE NAME AND	DOCUMENT #)		
(C	ORPORATE NAME AND I	DOCUMENT #)	 	

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

The name of the corporat	EACH ON TI	HE BEACH INC.	
-	IPAL OFFICE Principal street a		Mailing address, if different is:
5836 Palmer Ranch Pk	_ .	<u> </u>	
ARTICLE III PURPO	SE ne corporation is organized is:	Real Estate Rental	22 DEC
- -			
			90:11 ky
	•		
ARTICLE IV SHARE	S ann		-
The number of shares of s	ock is:		
ARTICI F V INITIAI	OFFICERS AND/OR DIRECT	OBS	
	EHAB FAHMY- VP		HEBA FAHMY - President
Address	5836 Palmer Ranch Pkwy		5836 Palmer Ranch Pkwy
_	Sarasota, FL 34238		Sarasota, FL 34238
_			
Name and Title		N	
		Name and Title;_	· · · · · · · · · · · · · · · · · · ·
Address _	<u> </u>	Address:	
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Name and Title:_		Name and Title:_	
Address _			
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Name and Title:		Name and Title:		
Address				
ARTICLE VI	REGISTERED AGENT Torida street address (P.O. Box NOT accept	calla Vasaka and in a samula and in		
Name:	HEBA FAHMY	able) of the registered agent is:		
Address:	5836 Palmer Ranch Pkwy			
	Sarasota, FL 34238	22 DE		
ARTICLE VII	INCORPORATOR	2.0 15 03.6 - 15 03.6 - 15 03.6		
The name and a	ddress of the Incorporator is:			
Name:	HEBA FAHMY	AM PRO SAN		
Address:	5836 Palmer Ranch Pkwy			
	Sarasota, FL 34238			
Effective date, if	EFFECTIVE DATE: Other than the date of filing: date is listed, the date must be specific and	(OPTIONAL) cannot be more than five days prior or 90 days after the		
Note: If the date the document's e	inserted in this block does not meet the app iffective date on the Department of State's re	licable statutory filing requirements, this date will not be listed as cords.		
Having been nan certificate, I am f	amiliar with and accept the appointment as r	ocess for the above stated corporation at the place designated in this egistered agent and agree to act in this capacity		
l suhmit this doc	Required Signature/Registered Ager	nt Date		
IIII WOL	umem unu ujjum inut ine jacis stated herei	in are true. I am aware that the false information submitted in a		
document to the l	Department of State constitutes a third degree	e felony as provided for in s.817.155, F.S.		