

P23000011557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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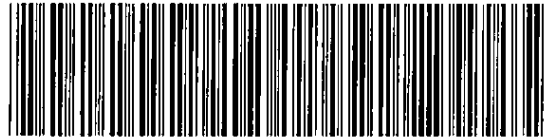
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



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S. CHATHAM

FEB 14 2023

02/09/23--01001--017 **350.00

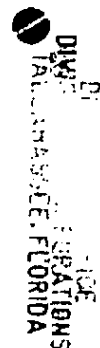
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2023 FEB 13 AM 11:12

2023 FEB -8 PM 3:34

SECRETARY OF STATE
TALLAHASSEE, FL



COVER LETTER

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

SUBJECT: XIII Manufacturing 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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Christopher Linman
Name (Printed or typed)

6538 Collins Avenue
Address

Miami Beach, FL 33141
City, State & Zip

347-292-1351
Daytime Telephone number

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

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

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: XIII Manufacturing Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6358 Collins Avenue

Miami Beach, FL 33141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and All Lawful
purpose

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christopher Linman - President Name and Title: _____

Address 6358 Collins Avenue Address: _____

Miami Beach, FL 33141

Name and Title: SAL Dioces - Secretary Name and Title: _____

Address 6358 Collins Avenue Address: _____

Miami Beach, FL 33141

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FL

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: Christopher Liman
Address: 6358 Collins Avenue
Miami Beach, FL 33141

ARTICLE VII INCORPORATOR

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

Name: Christopher Liman
Address: 6358 Collins Avenue
Miami Beach, FL 33141

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TALLAHASSEE, FL

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/07/23 (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:

Christopher Liman 02/07/23
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.

Christopher Liman 02/07/23
Required Signature/Incorporator Date