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TALLAHASSEE, FLORIDA

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DATE: 02/16/23

NAME: TRUE PERFECTION CONSTRUCTION FL CORP

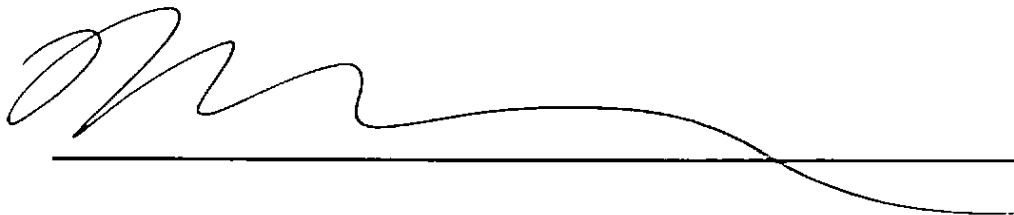
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COVER LETTER

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

SUBJECT: TRUE PERFECTION CONSTRUCTION FL CORP.
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Karen T. Rodriguez
Name (Printed or typed)

PO Box 128
Address

Glenmont, NY 12077
City, State & Zip

518-475-9285
Daytime Telephone number

tpi3102gmail.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: TRUE PERFECTION CONSTRUCTION FL CORP.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
20515 E. Country Club Drive
Suite 2247

Mailing address, if different is:

Aventura, FL 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

Construction and residential remodeling

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ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sarina Glanzberg, President

Name and Title: Simon Glanzberg, Treasurer

Address 20515 E. Country Club Drive
Suite 2247
Aventura, FL 33180

Address: 20515 E. Country Club Drive
Suite 2247
Aventura, FL 33180

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Simon Glanzberg
Address: 20515 E Country Club Dr, S 2247
Aventura, FL 33180

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Simon Glanzberg
Address: 20515 E Country Club Dr, S. 2247
Aventura, FL 33180

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

SIMON GLANZBERG

Required Signature/Registered Agent

2/13/2023

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.

SIMON GLANZBERG

Required Signature-Incorporator

2/13/2023

Date

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