To: 18506176381 From: 12147128131 Date: 02/22/23 Time: 10:23 PM Page: 01/03

## Division of Corporations Electronic Filing Cover Sheet

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(((H23000069752 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALING CORPORATE SERVICES INC.

Account Number : T20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

TENTER the email address for this business entity to be used for fortife annual report mailings. Enter only one email address please.

Email Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION

## G.O.A.T. LIFESTYLE INC.

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20-E955-4EE2-B2A5-84A5C550B16F

ARTICLES OF INCORPORATION

In compliance with Thapter 607 and/or Chapter 621.F S. (Profit)

14168 SW 139T	CIPAL OFFICE  Principal <u>street</u> address H-CT	14168 SV	Mailing address, if different i V 139TH CT	S
MIAMI, FL 331				
TICLE III PURP	OSE the corporation is organized is	RENTING AND/OR LEA	SING REAL ESTATE	
				- 2023
TICLE IV SHAR number of shares of	ES.	<u>CTORS</u>	LLAHASSEE,	FEB 23 AM 2
Name and Tul	<ul> <li>JONATHAN FERNANDEZ.</li> </ul>	DIRECTOR Name and Title	こ 1のなみに VA2の1コンフ 1回! ひ	IRTOR
Address	14168 SW 139TH CT		44168 SW 139TH CT	
Address	14168 SW 139TH CT	Address	14168 SW 139TH CT MIAMI, FL 33186	
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n Epyglobe ID: 0FD158	DBD-E955-4EE2-B2A6-84A8C65DB16F		/// 102000000752 200
Name and	! Title	Name and Title	(((H23000069752 3)))
Address			
ARTICLE VI - F	REGISTERED AGENT		
The name and Flo	prida street address (P C). Box NOT accept	able) of the registered agent is	
Name.	JONATHAN FERNANDEZ		
Address.	14168 SW 139TH CT	<del></del>	· 20
	MIAML FL 33186	<del></del>	TALLAHASSEE, FL
			FEB 23 A
	<u>NCORPORATOR</u>		ASY 3 M
The <u>name and ad</u>	dress of the Incorporator is		OF SEE
Name	JONATHAN FERNANDEZ		:: STA 2: -
Address	14168 SW 139TH CT	<del></del>	THE ST
	MIAMI, FL 33186		
4 <i>071015</i> 1711	EFFECTHE DATE.		
Effective date, if c	other than the date of filing	(OPTION:	AL)
<ul> <li>(If an effective da filing.)</li> </ul>	ate is listed, the date must be specific and	I cannot be more than five day	s prior or 90 days after the
Note: If the date	inserted in this block does not meet the app	olicable statutory filmg requirem	ents, this date will not be listed as
	fective date on the Department of State's re		
	ed as registered agent to accept service of pr miliar with and accept the appointment as		
C-7 /	Samuel Committee		2/21/2023   3:19 PM P
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

2/21/2023 | 3:19 PM PST