P33000030452

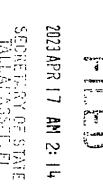
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(cristicalise) pri mono ny
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

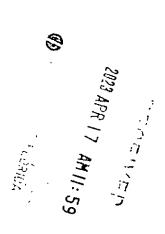
Office Use Only



900406074929







CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 677642 8304926

AUTHORIZATION :

COST LIMIT : \$ 70.00

****-----

ORDER DATE : April 14, 2023

ORDER TIME : 9:31 AM

ORDER NO. : 677642-005

CUSTOMER NO: 8304926

DOMESTIC FILING

NAME: PSD FL MANAGEMENT, INC.

EFFECTIVE DATE:

<u>XX</u>	ARTICLE	ES OF	7 INC	CORPORA	ATIC	NC		
	CERTIF	CATE	OF	LIMIT	ED I	PARTNE	RSH.	ΙP
	ARTICLE	ES OI	OR	GANIZAT	LIOI	1		
PLEASE	RETURN	THE	FOLI	LOWING	AS	PROOF	OF	FILING
	CERTI	FIED	COP	Y				

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

COVER LETTER

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

SUBJECT:	SD FL Management, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MÜST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	d a check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	☐ \$87.50 Filing Fee. Certified Copy & Certificate of Status
		ADDITIONAL CC	Dry KEQUIKED
FROM:	Paul Pawlowski	(Printed or typed)	
	28 Columbus Aven	• • •	
-		Address	
	Montclair, NJ 0704	2	
	City.	State & Zip	
	201-618-9715		
		elephone number	
	pawlowskip@ms E-mail address: (to be used		notification)

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

2023 APR 17 AM 2: 15

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

e name of the corpora			
RTICLE II PRINC	CIPAL OFFICE Principal street address		Mailing address, if different is:
124 Route 202 South,	Suite B9, Raritan, New Jersey 08869		
RTICLE III PURPO ne purpose for which t	<u>OSE</u> he corporation is organized is:All law	rful business purpos	ses permitted in the State of Florida
_	L OFFICERS AND/OR DIRECTORS Patrick Dibro Procident	No. 1 (Ph)	Patrick Dibre, Director
e number of shares of RTICLE V INITIA Name and Title Address	L OFFICERS AND/OR DIRECTORS Patrick Dibre, President 1124 Route 202 South, Suite B9	Name and Title: Address:	Patrick Dibre, Director 1124 Route 202 South, Suite B9
e number of shares of RTICLE V INITIA Name and Title Address	L OFFICERS AND/OR DIRECTORS Patrick Dibre, President		
e number of shares of RTICLE V INITIA Name and Title Address	L OFFICERS AND/OR DIRECTORS Patrick Dibre, President 1124 Route 202 South, Suite B9		1124 Route 202 South, Suite B9 Raritan, New Jersey 08869
e number of shares of RTICLE V INITIA Name and Title Address	LOFFICERS AND/OR DIRECTORS Patrick Dibre, President 1124 Route 202 South, Suite B9 Raritan, New Jersey 08869	Address: Name and Title:	1124 Route 202 South, Suite B9 Raritan, New Jersey 08869
e number of shares of RTICLE V INITIA Name and Title Address Name and Title:	Patrick Dibre, President 1124 Route 202 South, Suite B9 Raritan, New Jersey 08869 Patrick Dibre, Secretary 1124 Route 202 South, Suite B9 Raritan, New Jersey 08869	Address: Name and Title:	1124 Route 202 South, Suite B9 Raritan, New Jersey 08869

Name ar	d Title:	Name and Title:			
Address		Address:			
	<i>REGISTERED AGENT</i> lorida street address (P.O. Box NOT acceptal	ble) of the registered agent is:			
Name:	Corporation Service Company				
Address:	1201 Hays Street				
	Tallahassee, FL 32301				
ARTICLE VII	INCORPORATOR				
The name and ac	idress of the Incorporator is:				
Name:	Paul Pawlowski				
Address:	28 Columbus Avenue				
	Montclair, NJ 07042				
ARTICLE VIII	EFFECTIVE DATE:				
Effective date, if (If an effective diffing.)	other than the date of filing:late is listed, the date must be specific and o	. (OPTIONAL) cannot be more than five days prio	or or 90 days after the		
Note: If the date	inserted in this block does not meet the appli ffective date on the Department of State's rec		his date will not be listed a		
Having been nan certificate, I am f	ned as registered agent to accept service of production with and accept the appointment as re	gistered agent and agree to act in thi.	at the place designated in t s capacity		
177	Eylina Bahri Assistant Vice Prosulent Required Signature/Registered Agent		04/17/2023		
	Required Signature/Registered Agen		Date		
	ument and affirm that the facts stated hereit	i are true. I am aware that the falso felony as provided for in s.817.155, I	e information submitted in F.S.		
document to the l	Department of State constitutes a third degree				
I submit this doc document to the life family for Required Signatu	erlandri		April 14, 2023		