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To:

Division of Corporations

Fax Number : (858)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I2000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please."\*

Email Address:\_

## FLORIDA PROFIT/NON PROFIT CORPORATION PH1 CREATIVE LABS CORP.

Certificate of Status	0	
Certified Copy	1	
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Estimated Charge	\$78.75	

Electronic Filing Menu

Corporate Filing Menu

Help

D. O'KEEFE APR 1 9 2023

## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

PH1 Creative Labs CORF.	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
2600 SW 27th AVE	
PH-01 11th FLOOR	<del></del>
Miami F1 33133	<del></del>
ARTICLE III SHARES: The number of shares of stock is: 107)	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICER	S:
BRUND ALONSO BOZA (P)	2023
	23 APR
	<del>- \$</del> . \$. 6
	<del></del>
ARTICLE V INITIAL REGISTERED AGENT AND STREET A DI	
The name and Florida street address (PO Box not acceptable) of the registere	d agent is:
BRUNO ALONSO BOZA	
2600 SW 27th AVE	<del></del>
PH-01 11+h FLOOR	
MIAM'I FI 33133	
ARTICLE VI INCORPORATOR: The name and address of the Incorp	orator is:
BRUNO ALONSO BOZA	<del></del>
2000 SW 274 AVE	<del></del>
PH-01 11th FLOOR	
Miami Fl 38133	

## Required Signatures:

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

Registered Agent 4/14/23

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.

4/14/23 5ate

2023 APR 18 PH 4: 11