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Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516)935-3940
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FLORIDA
DIVISION OF
CORPORATIONS

**FLORIDA PROFIT/NON PROFIT CORPORATION
ELMANDA-FL, INC**

Certificate of Status	1
Certified Copy	0
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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: ELMANDA-FL, INC

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
6295 BAHIA DEL MAR CIRCLE, #308
ST PETERSBURG, FL 33715

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: OFFICES OF REAL ESTATE AGENTS & BROKERS

ARTICLE IV SHARES

The number of shares of stock is: 1,500 at No Par Value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ELIZABETH MARKOVIC - Presiden/Director Name and Title: _____

Address 6295 BAHIA DEL MAR CIRCLE, #308 Address: _____
ST PETERSBURG, FL 33715

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ELIZABETH MARKOVIC
 Address: 6295 BAHIA DEL MAR CIRCLE, #308
 ST PETERSBURG, FL 33715

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: ELIZABETH MARKOVIC
 Address: 6295 BAHIA DEL MAR CIRCLE, #308
 ST PETERSBURG, FL 33715

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: AUGUST 1, 2023 (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:**Elizabeth Markovic*

Required Signature/Registered Agent

MAY 17, 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.**Elizabeth Markovic*

Required Signature/Incorporator

MAY 17, 2023

Date

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