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(R	Requestor's Name)	
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(A	(ddress)	
	City/State/Zip/Phone #)	
(C	.ity/State/Zip/Pflofie #)	
PICK-UP	WAIT	MAIL
	Business Entity Name)	
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([Occument Number)	·
Cartified Canina	Cadification	1 Status
Certified Copies	Centificates o	Status
Special Instructions to Fi	ling Officer:	
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Office Use Only



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FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

EXAMINIER'S INITIALS:____

Authorization Signature	count: 120210000160: \$70.00 fantall
Ceemantic Inc BUSINESS	DOC#
Certified Copy of Articl Certificate of Status	es
NEW FILINGS	<u>AMENDMENTS</u>
Profit Corp Not for Profit Officer/Director Limited Liability Domestication Other X CORP LLLP	Amendment Resignation of R.A. or member Dissolution Change of Registered Agent Revocation of Dissolution Merger Conversion Amended and restated Articles Statement of Correction
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
<u>Trademark</u>	
Annual Report	Foreign filing
	Limited Partnership
Fictitious Name	Reinstatement
_ APOSTILLE	Other
Country	

COVER LETTER

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

SUBJECT: CEEM	IANTIC INC		
30D0DC1	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	i 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 PY REQUIRED
		-	
FROM:	Maria-Costanza Barducci Name	e (Printed or typed)	
	5 W 19th St 10th floor		
		Address	
	New York, NY 10011		
	City,	State & Zip	
	Daytime T	elephone number	
	E-mail address: (to be use	d for future annual report r	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)

<u>ARTICLE I NAME</u>	CEEMANTIC INC		
The name of the corpora	tion shall be:		<u></u>
100 Biscayne Blvd Miami, FL 33132	Principal street address suite 1114	Mailing same as princ	address, if different is:
ARTICLE III PURPO The purpose for which t	OSE he corporation is organized is: <u>all lawf</u>	ul and legal purpose	
ARTICLE IV SHAR. The number of shares of			
ARTICLE V INITLA	L OFFICERS AND/OR DIRECTORS -: P. S. VP Anna Salomone	Name and Title.	
Address	100 Biscayne Blvd suite 1114		
	Miami, FI. 33132		
Name and Title		Name and Title:	
Address		Address:	
			20:30:
Name and Title		Name and Title:	
Address			

Name an	d Title:	Name and Title:	
Address			
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of t	the registered agent is:	
Name:	Premier International LLC		
Address:	100 Biscayne Blvd suite 1114		
	Miami, FL 33132		
ARTICLE VII	<u>INCORPORATOR</u>		
The <u>name and ac</u>	ddress of the Incorporator is:		
Name:	Anna Salomone		
Address:	100 Biscayne Blvd suite 1114		
	Miami, FL 33132		
Effective date, if (If an effective d filing.) Note: If the date	other than the date of filing: late is listed, the date must be specific and cannot inserted in this block does not meet the applicable soffective date on the Department of State's records.	be more than five days price	·
	ned as registered agent to accept service of process for Camiliar with and accept the appointment as registere		is capacity
Jam 7 Cours	Required Signature/Registered Agent		06/13/2023 Date
	cument and affirm that the facts stated herein are to Department of State constitutes a third degree felony		
Attro-		Date	06/13/2023
Required Signatu	ire/incorporator	Date	2023
			-
			5.5
			fi: C