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To:

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

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : 120030000043
Phone : (800)342-9856
Fax Number : (800)354-3381

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

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FLORIDA PROFIT/NON PROFIT CORPORATION
REZORT INC.

Certificate of Status	0
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Estimated Charge	\$70.00

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MA

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

ARTICLE I NAME

The name of the corporation shall be:

REZORT INC.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address9261 SW 174TH STREET
PALMETTO BAY, FL 33157

Mailing address, if different is:

9261 SW 174TH STREET
PALMETTO BAY, FL 33157**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

STUDIO RENTAL & EVENT SPACE RENTAL**ARTICLE IV SHARES**

The number of shares of stock is:

200 NPV**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **MILOS ANGELOV - PRESIDENT/TREASURER**Address: **9261 SW 174TH STREET
PALMETTO BAY, FL 33157**Name and Title: **RAMON IBANGA JR - VICE PRESIDENT/SECRETARY**Address: **2643 SW 32ND CT
MIAMI, FL 33133**

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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MIAMI, FL

(H23000222696 3)

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: MILOS ANGELOV
Address: 9261 SW 174TH STREET
PALMETTO BAY, FL 33157

ARTICLE VII INCORPORATORThe name and address of the Incorporator is.

Name: LAWRENCE A. KIRSCH
Address: 41 STATE STREET, SUITE 700
ALBANY, NY 12207

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing, _____. (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

/s/ Milos Angelov
Required Signature/Registered Agent

06/22/2023
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.

Lawrence A. Kirsch
Required Signature/Incorporator

06/22/2023
Date

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