P23000056865

(Req	uestor's Name)	
(Add	ress)	
`	,	
(Add	ress)	
(City)	/State/Zip/Phone	= #)
	_	
PICK-UP	WAIT	MAIL
(Busi	iness Entity Nan	ne)
(500)	moss Emily Man	,
		
(Doc	ument Number)	
Certified Copies	Certificates	of Status
	· • • • • • • • • • • • • • • • • • • •	
Special Instructions to Fi	lling Officer:	
·-· · · - · · · · · · · · · · · · ·		





000412574600

LLAHASSEE, FLORI

RECEIVED



CT CORP

(850)656-4724 3458 Lakeshore Drive, Tallahassee, FL 32312

08/03/2023

Date:

wil SW

	Acc#I20160000072	<i>V</i> - <i>V</i>	
Name:	Defense Prime, Inc.		
Document #:			
Order #:	15060638		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:	Country of Destination: Number of Certs:		
Filing: 🗸	Certified: ✓ Plain: COGS: ✓	Email Address for Annual Report Notifications:	
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 87.50		

Thank you!

COVER LETTER

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

SUBJECT: Defense Prime, Inc.

~ \$78.75	□ \$78.75	⊠ \$87.50	
Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate o Status	
	ADDITIONAL CO	PY REQUIRED	
Name	e (Printed or typed)		
Address			
on, MA 02210			
City.	. State & Zip		
) 832-1781			
Daytime T	Felephone number		
@foleyhoag.com			
	Filing Fee & Certificate of Status Arie, Foley Hoag LLP Name Scaport Blvd. Son, MA 02210 City.	Filing Fee & Certificate of Status ADDITIONAL CO Aric, Foley Hoag LLP Name (Printed or typed) Scaport Blvd. Address con, MA 02210 City, State & Zip	

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

FL001-12/16/2021 Wolters Kluwer Online

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

340 Avenida Del R	Principal <u>street</u> address		Mailing address, if different is:
etray Beach			<u></u> .
orida 33446 			<u> </u>
RTICLE III PURI	POSE the corporation is organized is: To engage	in any and all busi	ness and any lawful act or activity
or which corporation:	s may be organized under Chapters 607 and		nutes.
			
		<u> </u>	
RTICLE IV SHAL	RES 100		
he number of shares of	of stock is:		
	IAL OFFICERS AND/OR DIRECTORS		Nr. (8.1) (8.1)
Name and Tit		Name and Title	· - · - ·
Address	10340 Avenida Del Rio	Address:	10340 Avenida Del Rio
	Deiray Beach		Delray Beach
	Florida 33446	_	Florida 33446
Name and Titl	Sai Gopal, Treasurer	Name and Title	:
	10340 Avenida Del Río		
Address	Delray Beach	Address.	-
-			
	Florida 33446	<u> </u>	
	le:	Name and Title	2023
Name and Titl			75
Name and Titl Address		Address:	
		Address:	: :
		Address:	- :
		Address: 	÷ <u>†</u>

Name and Title:________Name and Title:_______ Address: Address ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: C T Corporation System 1200 South Pine Island Road Plantation, Address: FL 33324 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Gil Arie, Foley Hoag LLP Name: 155 Scaport Blvd. Address: Boston, MA 02210 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the 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 C T Corporation System On Required Signature/Registered Agent By:

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 Prefirence of State constitutes a third degree felony as provided for in s.817.155, F.S. August 2, 2023 Date

Gil Arie

Required Signature/Incorporator

- 689713B85FC347A ..