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**P23 0000 61975**

Florida Department of State

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

Fax Number : (516)935-3088

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

Email Address: ERIC@ESMTAX.COM**FLORIDA PROFIT/NON PROFIT CORPORATION****Tavares & Co.**

Certificate of Status	1
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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: Tavares & Co.**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address  
3001 South Ocean Drive, Apt 939  
Hollywood, FL 33019Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Consulting  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**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: Joel Tavares - President/Director

Name and Title: \_\_\_\_\_

Address: 3001 South Ocean Drive, Apt 939  
Hollywood, FL 33019  
\_\_\_\_\_  
\_\_\_\_\_Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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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:

Name: Joel Tavares  
Address: 3001 South Ocean Drive, Apt 939  
Hollywood, FL 33019

**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:

Name: Joel Tavares  
Address: 3001 South Ocean Drive, Apt 939  
Hollywood, FL 33019

**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*

 August 24, 2023  
Required Signature/Registered Agent 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.*

 August 24, 2023  
Required Signature/Incorporator Date

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