

P23000069763

(Requestor's Name)

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(Business Entity Name)

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Special Instructions to Filing Officer:

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200416140562

S. CHATHAM
SEP 28 2023

2023 SEP 28 PM 5:05



DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

2023 SEP 28 AM 10:20

RECEIVED



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations
From: Alexxis Weiland-Sorenson
Ext: 61592
Date: 09/28/23
Order #: 1284022-1
Re: G5 Venture ORL1 Corp.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:
120000000195

AUTH:

A handwritten signature in black ink, appearing to read "Alexxis Weiland-Sorenson", written over a horizontal line.

Please take the following action:

File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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: G5 Venture ORL1 Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address
40 SW 13th Street
Suite 802
Miami, FL, 33130

Mailing address, if different is:
40 SW 13th Street
Suite 802
Miami, FL, 33130

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any lawful purpose

ARTICLE IV SHARES

The number of shares of stock is: 1,000 shares of \$1.00 par value each share

2023 SEP 29 PM 5:05

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Odair Eliseu Guidi, D/P
Address: 40 SW 13th Street
Suite 802
Miami, FL, 33130

Name and Title: Felipe de Camargo Guidi, V
Address: 40 SW 13th Street
Suite 802
Miami, FL, 33130

Name and Title: Julio Eliseu Guidi, S
Address: 40 SW 13th Street
Suite 802
Miami, FL, 33130

Name and Title: Diego Eliseu de Camargo Guidi, T
Address: 40 SW 13th Street
Suite 802
Miami, FL, 33130

Name and Title:
Address:

Name and Title:
Address:

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: Ricardo Del GiglioAddress: 40 SW 13th Street, Suite 802Miami, FL, 33130**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: Odair Eliseu GuidiAddress: 40 SW 13th Street, Suite 802Miami, FL, 33130

2023 SEP 28 PM 5:05

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

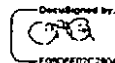
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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*
60C0A812008431

9/20/2023

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.
60C0A812008431

9/22/2023

Required Signature/Incorporator

Date