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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ALEX PINA CO. Account Number : I20190000095 Phone : (305)803-8471 Fax Number : (305)602-3977

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Email Address:

client@alexpina.co

FLORIDA PROFIT/NON PROFIT CORPORATION

Pilolo Corp

Certificate of Status	0
Certified Copy	0
Page Count	03
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Help

To:

ARTICLES OF INCORPORATION

2023-10-18 15:39;39 GMT

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

nestead, FL 33035 CLE IV PURPOSE Durpose for which the corporation is organized is:	ICLE I NAME arne of the corporation shall be:	Pilolo Co	rp 	
Any And All Lawful Purpose. CLE IV SHARES 10,000	1 SE 10th St Principal street	address		Mailing address, if different is:
Parpose for which the corporation is organized is:	nestead, FL 33035			
Name and Title:	<u>CLE III PURPOSE</u> surpose for which the corporation i	is organized (s:	Any And All L	awful Purpose.
Address Name and Title:				
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Name and Title:				
Name and Title: Address Daisy M Prieto Vera - President Name and Title: Address:	CLE IV CHARPS			
Address: Homestead, FL 33035 Name and Title: Name and Title: Address: Name and Title: Nume and Title:		10,000		
Address Homestead, FL 33035 Name and Title: Name and Title: Address Address: Name and Title: Nume and Title:	mber of shares of stock is:	AND/OR DIRECTORS		
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Name and T	Title:	Name and Title:	
Address		Address:	
	<u>GISTERED AGENT</u> da street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Alex Pina Co.		
Address:	8400 NW 36th St Ste 450		
	Doral, FL 33166		
		<u>—</u>	
ARTICLE VII IN	<u>CORPORATOR</u>		
The name and addr	ess of the Incorporator is:		
Name:	Daisy M Prieto Vera		
Address:	2381 SE 10th St		
	Homestead, FL 33035		
		· 	
ARTICLE VIII E	FFECTIVE DATE:		
(If an effective date	er than the date of filing: is listed, the date must be specific and ca	(OPTIONAL) nnot be more than five days prior	or 90 days after the
filing.)			
Note: If the date ins the document's effect	erted in this block does not meet the applica tive date on the Department of State's recor	ble statutory filing requirements, thi ds.	s date will not be listed as
Having been named certificate, I am fami	us registered agent to accept service of proce. Iliar with and accept the appointment as regi	ss for the above stated corporation at stered agent and agree to act in this c	the place designated in this apacity
	d 100.		10/18/2023
	Required Signature/Registered Agent	<u> </u>	Date
I submit this documedocument to the Dep	ent and affirm that the facts stated herein a artment of State constitutes a third degree fe	ire true. I am aware that the false though as provided for in \$.817.155, F.S.	aformation submitted in a L
	DALASY PRIETO		10/18/2023
Required Signature/I	ncorporator	Date	6.7
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			$\overline{\Box}$
			: 0
			
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