

P2300000 84460

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)813-1184
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: Jessica@advantages.net

FLORIDA PROFIT/NON PROFIT CORPORATION
ADVANTAGES AGENCY INC

Certificate of Status	1
Certified Copy	0
Page Count	03
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Help

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: ADVANTAGES AGENCY INC

ARTICLE II PRINCIPAL OFFICE

Principal street address Mailing address, if different is:
188 WESTBURY K
DEERFIELD BEACH, FL 33442

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: MARKETING

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:	<u>GOLDA PEARLMAN - President/Director</u>	Name and Title:	
Address:	<u>188 WESTBURY K</u>	Address:	
	<u>DEERFIELD BEACH, FL 33442</u>		
Name and Title:		Name and Title:	
Address:		Address:	
Name and Title:		Name and Title:	
Address:		Address:	

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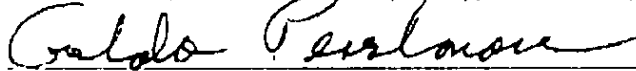
Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: GOLDA PEARLMANAddress: 188 WESTBURY KDEERFIELD BEACH, FL 33442**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: GOLDA PEARLMANAddress: 188 WESTBURY KDEERFIELD BEACH, FL 33442**ARTICLE VIII EFFECTIVE DATE:**

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

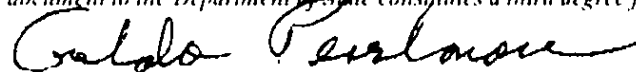
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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*

Required Signature Registered Agent

DECEMBER 5, 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.

Required Signature Incorporator

DECEMBER 5, 2023

Date