

P2300086856

Florida Department of State

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

Email Address: rcarus@rjcarusotax.com

**FLORIDA PROFIT/NON PROFIT CORPORATION  
PRISM PROPERTY GROUP, INC.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 1       |
| Certified Copy        | 0       |
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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: PRISM PROPERTY GROUP, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address2890 TWIN OAKS WAY  
WELLINGTON, FL 33414

Mailing address, if different is:

**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: 1,500 at No Par Value**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: KATHERINE KAHANOVITZ - President/Director

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

Address 2890 TWIN OAKS WAY  
WELLINGTON, FL 33414

Address: \_\_\_\_\_

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 AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: KATHERINE KAHANOVITZ  
Address: 2890 TWIN OAKS WAY  
WELLINGTON, FL 33414

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

Name: KATHERINE KAHANOVITZ  
Address: 2890 TWIN OAKS WAY  
WELLINGTON, FL 33414

**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*

X \_\_\_\_\_  
Required Signature/Registered Agent

December 4, 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.*

X \_\_\_\_\_  
Required Signature/Incorporator

December 4, 2023

Date

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