

P240000001916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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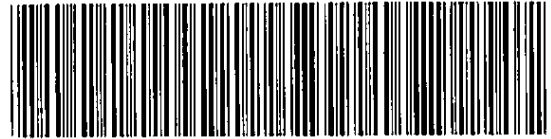
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: PLT CORPORATE GROUP INC.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
& Certificate of Status

| | |
|----------------------------------|----------------------------------|
| <input type="checkbox"/> \$78.75 | <input type="checkbox"/> \$87.50 |
| Filing Fee | Filing Fee, |
| & Certified Copy | Certified Copy |
| | & Certificate of |
| | Status |
| ADDITIONAL COPY REQUIRED | |

FROM: Preston Timmons
Name (Printed or typed)

4015 46th Street North
Address

St. Petersburg, Florida 33714
City, State & Zip

(727) 280-4480
Daytime Telephone number

pltimmons@yahoo.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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: PLT CORPORATE GROUP INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4015 46th Street North
St. Petersburg, Florida 33714

4015 46th Street North
St. Petersburg, Florida 33714

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Management

ARTICLE IV SHARES

The number of shares of stock is: 25,000 of common stock of no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Preston Timmons-CEO Name and Title: Preston Timmons-Director

Address 4015 46th Street North Address: 4015 46th Street North
St. Petersburg, Florida 33714 St. Petersburg, Florida 33714

Name and Title: Preston Timmons-CFO Name and Title: _____

Address 4015 46th Street North Address: _____
St. Petersburg, Florida 33714

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Preston Timmons
Address: 4015 46th Street North
St. Petersburg, Florida 33714

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Preston Timmons
Address: 4015 46th Street North
St. Petersburg, Florida 33714

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SECRETARY OF STATE
TALLAHASSEE, FL
FILED

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

Preston Timmons

Required Signature/Registered Agent

12-15-23

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.

Preston Timmons

Required Signature/Incorporator

12-15-23
Date