## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION YYTON TECHNOLOGY FLORIDA, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

ind Request

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

ICLE II PRI	NCIPAL OFFICE		
RTICLE 11 PRINCIPAL OFFICE Principal street address		Mailing address, if different is:	
02 NW 72ND AVE		.wamng auuje	ss, ii dilierent is:
JAMI, FL 33122			
TICLETII PUR purpose for whic	POSE h the corporation is organized is: ANY AN	D ALL LAWFULL BUSINES	SS.
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number of shares	of stock is: 100 SHARES AT \$1.00 PAR	Name and Title:Address:	
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Name and Title:		Name and Title:		
Address				
APTICLEVI	RECISTERED ACTION		_	
The name and	REGISTERED AGENT Florida street address (P.O. Box NOT acceptab	le) of the registered agent is:		
Name:	LUAYY Y. ABUQARE	_		
Address:	2802 NW 72ND AVE			
	MIAMI, FL 33122			
<u>ARTICLE VII</u>	INCORPORATOR		-	
The name and a	ddress of the Incorporator is:			
Name:	LUAYY Y. ABUQARE			
Address:	2802 NW 72ND AVE			
	MIAMI, FL 33122	_ <del></del>		
Effective date, if (If an effective of filing.)  Note: If the date	einserted in this block does not meet the applications date on the Department of State's reco	nnot be more than five days prior or 90		
Having been nan certificate, I am f	ned us registered agent to accept service of proce familiar with and accept the appointment as regi	ss for the above stated corporation at the plo stered agent and agree to act in this capacit	ace designated in this	
	Luayy Cf. Abugare	01/08/	2024	
	Required Signature/Registered Agent		Date	
I submit this doc document to the I	ument and affirm that the facts stated herein of State constitutes a third degree fe	tre true. I am aware that the false inform lony as provided for in s.817.155, F.S.	ation submitted in a	
Required Signatu	Luayy G. Abugare	01/08	/2024	
d will em DiBrigen	or meorporator	Date	<del></del>	