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FLORIDA PROFIT/NON PROFIT CORPORATION C.T. VENTURES INC

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Electronic Filing Menu Corporate Filing Menu

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

<u>CLEII PRINCI</u> P	PAL OFFICE rincipal street address	Mailing ad	dress, if different is:
SW 3rd Street S	ulte CH 701		······································
ami, FL 33130	· · · · · · · · · · · · · · · · · · ·		
CLE III PURPO: parpose for which the	SE e corporation is organized is: Actor and	i Commercial Spokespe	7500
			······································
			•• •
ICLE IV SHARE	<u>100</u>		PH
number of shares of :	stock 15: 100		
<u>ICLE V. INTILA</u>	L OFFICERS AND/OR DIRECTORS		\sim
Name and Title			
Address	90 SW 3rd Street Sulte TH 701	Address:	
	Miami, FLK 33130		
Name and Title:		Name and Title:	
Address		Address:	· · · · · · · · · · · · · · · · · · ·
Address			
AULUS			
KUUGS			· · · · · · · · · · · · · · · · · · ·
Name and Title:		Address:	

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To:

Levitas

Name and Title:	Name and Title	·
Address	Address:	

<u>ARTICLE VI REGISTERED AGENT</u> The <u>pame and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

Name: Celines Toribio

ddress:	90 SW 3rd Street Suite TH 701	
	Miami, FL 33130	

ARTICLE VII INCORPORATOR

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. _____.

The name and address of the Incorporator is:

Name:	Celines Toribio
Address:	90 SW 3rd Street Suite TH 701
	Miami, FL 33130



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

01/22/2024 Required Signature/Registered Agent 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

01/22/2024 Date