

P24000009527

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (813)436-5206

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

Liberum Stellae Corp.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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Corporate Filing Menu

Help

2024 FEB -9 AM 5:51

2024 FEB -9 PM 1:32

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: Liberum Stellae Corp.**ARTICLE II PRINCIPAL OFFICE**Principal street address7901 4th St N STE 300St. Petersburg, FL 33702

Mailing address, if different is:

667 Downing Cr.Davenport, FL 33897**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any Legal Business Purpose**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Hubert-Roy, Nicholas (D, T)Name and Title: Koubi, Amine (D, S)Address 7901 4th St N STE 300Address: 7901 4th St N STE 300St. Petersburg, FL 33702St. Petersburg, FL 33702Name and Title: Holding 187 LLC (P)

Name and Title: _____

Address 7901 4th St N STE 300

Address: _____

St. Petersburg, FL 33702

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: Registered Agents Inc
 Address: 7901 4th St N STE 300
St. Petersburg, FL 33702

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Registered Agents Inc
 Address: 7901 4th St N STE 300
St. Petersburg, FL 33702

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

David Roberts

Required Signature/Registered Agent

2/5/2024

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.

Robin Jones

Required Signature/Incorporator

2/5/2024

Date

FILED
2024
FEB 5
11:32
AM
CLERK OF THE
COURT
TALLAHASSEE, FL

P24000009527

Name Resolution

I, (HOLDING 187 LLC), last member and authorized person of (LIBERUM STELLAE LLC) acting on behalf of the company, authorize Robin Jones of Registered Agents Inc to file the name Liberum Stellae Corp. a Florida Corporation for use in the State of Florida.

I acknowledge that the original LIBERUM STELLAE LLC, L23000091784 has been dissolved, and I have no intentions to reopen it.

Dated this 1st day of February, 2024.



Authorized Member