Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000075370 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : RASI

Account Number : I20220000023 Phone : (800)221-2972 : (917)243-5843 Fax Number

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

| Email | Address: | <br> |
|-------|----------|------|
|       |          |      |

## FLORIDA PROFIT/NON PROFIT CORPORATION SSR REALTY INC

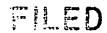
| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$70.00 |

Electronic Filing Menu Corporate Filing Menu

Help

T. MATTHEWS

FEB 29 2024



## ARTICLES OF INCORPORATION 2024 FEB 28 PM 4: 14 In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| ARTICLE I NAME            | SSR REALTY INC   | EE PROMAY OF STATE<br>PROMASSEEPFL                       |   |
|---------------------------|--|--|---|
| The name of the corpora   | ion shall he:  |  | - |
| ARTICLE II PRINC          | <u>TPAL OFFICE</u>                                       |  |   |
| 4028 ISLE VISTA AVI       | Principal <u>street</u> addr <del>e</del> ss<br>ENUE     | Mailing address, if different is: 4028 ISLE VISTA AVENUE |   |
| BELLE ISLE, FL 3281       | 2  | BELLE ISLE, FL 32812                                     |   |
|                           |  |  |   |
| AUTICI FIII DIIDU         | DVF  |  |   |
| The purpose for which the | NSE to engage in the corporation is organized is:        | n any lawful act or activity for                         |   |
| which corporations may    | be organized.  |  |   |
|                           | ,  |  |   |
|                           |  |  |   |
|                           |  |  |   |
|                           |  |  |   |
|                           |  |  |   |
|                           |  |  |   |
|                           |  |  |   |
|                           | <u></u>  |  |   |
| ARTICLE V INITIA          | L OFFICERS AND/OR DIRECTORS  NAROTAN RAMNARINE-President | Name and Title:  |   |
|                           | JOSE ISLE VISTA A VENIUS                                 |  |   |
| Address                   | BELLE ISLE, FL 32812                                     | Address:   |   |
|                           | DECLE ISLE ( PL 32012                                    |  |   |
|                           |  |  |   |
|                           |  |  |   |
| Name and Title;           |  | Name and Title:  |   |
|                           |  |  |   |
| Address                   |  | Address:   |   |
|                           |  |  |   |
|                           |  |  |   |
|                           |  |  |   |
| Name and Title            | ,  | Name and Title:  |   |
| Name and Title:           |  | Nume and True:   |   |
| Address                   |  | Address:   |   |
|                           |  |  |   |
|                           |  |  |   |
|                           |  |  |   |

| Name and Title:                       |   | Name and Title:  |  |  |
|---------------------------------------|---|--|--|--|
| Address                               |   | Address:   |  |  |
|                                       |   |  |  |  |
|                                       | <del></del> -   |  |  |  |
|                                       |   |  |  |  |
| ARTICLE VI                            | REGISTERED AGENT  |  |  |  |
|                                       | Florida street address (P.O. Box NOT accepta  | ible) of the registered agent is:  |  |  |
| Name:                                 | NAROTAN RAMNARINE   |  |  |  |
| Address:                              | 4028 ISLE VISTA AVENUE  |  |  |  |
|                                       | BELLE ISLE, FL 32812  |  |  |  |
| 4071015101                            | N/CORROR (TOR   |  |  |  |
| <u>METICLE VII</u>                    | INCORPORATOR  |  |  |  |
| The name and a                        | address of the Incorporator is:   |  |  |  |
| Name;                                 | NAROTAN RAMNARINE   |  |  |  |
| Address:                              | 4028 ISLE VISTA AVENUE  |  |  |  |
|                                       | BELLE ISLE, FL 32812  |  |  |  |
|                                       |   |  |  |  |
| Effective date i                      | EFFECTIVE DATE:  Sother than the date of filing:  | (OPTIONAL)   |  |  |
| (If an effective days after the f     | date is listed, the date must be specific and   | cannot be more than five business days prior or 90 business  |  |  |
| Note: If the dat                      | te inserted in this block does not meet the appl.   | icable statutory filing requirements, this date will not be listed as  |  |  |
| the document's                        | effective date on the Department of State's rec   | ords.  |  |  |
| Having been no<br>this certificate, i | nmed as registered agent to accept service of p<br>I am familiar with fund accept the appointment | process for the above stated corporation at the place designated in<br>as registered agent and agree to act in this capacity |  |  |
|                                       | m Sal   | 2/03/0   |  |  |
|                                       | Required Signature Registered Ages  | $\frac{2/23/2}{Date}$  |  |  |
| I submit this do                      | cument and affirmation the facts stated treret  | in are true. I am aware that the false information submitted in a  |  |  |
| aocument to the                       | Pepariment of State considutes a third degree   | 1 / .  |  |  |
| <u> </u>                              |   | 2/23/24  |  |  |
| Keqi                                  | uired/Signatufe/Hecorporator  | / Daty   |  |  |