Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : USACORP INC. Account Number : I20130000019 Phone : (718)362-4789 Fax Number : (718)408-2550

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

Email Address: __Oconklingl@stb.international

FLORIDA PROFIT/NON PROFIT CORPORATION

Green Machines USA Inc.

Certificate of Status	0
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Corporate Filing Menu

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ARTICLES OF INCORPORATION

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

TICLE II PRINCIPAL OFFICE Principal street address			Mailing address, it different is		
SE Gran Via Wa	у	101 Ceda	101 Cedar Lane, Suite 301		
, FL 34996		Feaneck,	Feaneck, NJ 07666		
CLE III PURP arpose for which	POSE the corporation is organized is: Vending M.	achine			
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TLE IV SHAK	<u>PES</u> 1000				
imber of shares o	AL OFFICERS AND/OR DIRECTORS [David Coulding Provident F. Tennyage		Edward Gennusa, Vice President		
imber of shares of Shares of Shares of Share and Title	AL OFFICERS AND/OR DIRECTORS David Conkling, President & Treasurer 101 Cedar Lane, Suite 301	_ Name and Title:	Edward Gennusa, Vice President 101 Cedar Lane, Suite 301		
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mber of shares of the V INITE Name and Titl Address	PES 1000 f stock is: AL OFFICERS AND/OR DIRECTORS le: David Conkling, President & Treasurer 101 Cedar Lane, Suite 301	_ Name and Title: _ Address: _	Teaneck, NJ 07666		
imber of shares of the V INITE Name and Titl Address	f stock is: AL OFFICERS AND/OR DIRECTORS David Conkling, President & Treasurer 101 Cedar Lane, Suite 301 Teaneck, NJ 07666	Name and Title: Address: Name and Title:	101 Cedar Lane, Suite 301 Teaneck, NJ 07666		
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Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS David Conkling, President & Treasurer 101 Cedar Lane, Suite 301 Teaneck, NJ 07666	Name and Title: Address: Name and Title: Address:	101 Cedar Lane, Suite 301 Teaneck, NJ 07666 2024 FEE 29 PM 2: C		

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Name ar	nd Title:	Name and Title:	
Address		Address:	
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptal	alor (18	
Name:	Ahron Vogel	sier of the registered agent is:	
Address:	7064 Northwest 49 Street		
	Lauderhill, FL 33319		· 2 ~
		***************************************	: Z2 : Z-
ARTICLE VII	<u>INCORPORATOR</u>		
The name and ac	ddress of the Incorporator is:		i o l
Name:	David Conkling		70 10
Address:	101 Cedar Lanc, Suite 301		2:6
	Teaneck, NJ 07666		<i>ii</i> 9
Effective date, if	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and cling.)	(OPTION) annot be more than five busi	AL) ness days prior or 90 business
Note: If the date the document's e	inserted in this block does not meet the applic flective date on the Department of State's reco	table statutory filing requirements.	ents, this date will not be listed as
Having been nam this certificate, I	ned as registered agent to accept service of pr am familiar with and accept the appointment of	ocess for the above stated corp is registered agent and agree to	poration at the place designated in oact in this capacity
	/s/ David Conklir	ng	02/29/2024
•	Required Signature/Registered Agent	.,	Date
I submit this doc document to the i	ument and affirm that the facts stated herein Department of State constitutes a third degree	are true, I am aware that the felony as provided for in s.817.	e false information submitted in a
	/s/ David Conkling	3	02/29/2024
Requi	red Signature/Incorporator		Date