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(Requestor's Name) (Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



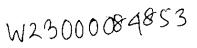
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June 16, 2023

FRENCHY ROY YOUR PERMIT SOLUTION, INC./ROY, INC. 3440 HOLLYWOOD BLVD., STE 415 HOLLYWOOD, FL 33021 US

SUBJECT: YOUR PERMIT SOLUTION, INC./ROY, INC.(CROSS REF)

Ref. Number: W23000084853

We have received your document for YOUR PERMIT SOLUTION, INC./ROY, INC.(CROSS REF) and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the jurisdiction and the date on which the converting entity was first created or otherwise came into being.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Dil Sultana Regulatory Specialist II

Letter Number: 323A00013706 HAN 1

COVER LETTER

Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:

ROY INC./ YOUR PERMIT SOLUTION, INC. (CROSS REF)

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

\$ 50.00 Certificate of Domestication Articles of Incorporation and Certified Copy § 78.75

Total filing fee \$128.75

OPTIONAL:

Certificate of Status \$ 8.75

From: FRENCHY ROY

Name (printed or typed)

3440 HOLLYWOOD, BLVD., STE 415

Address

HOLLYWOOD, FL 33021

City, State & Zip

800 973-0023 EXT. 0

Daytime Telephone Number

ROY@YOURPERMITSOLUTION.COM

E-mail address: (to be used for future annual report notification)

INH\$53 (3/20)

Articles of Domestication Foreign Corporation Domesticating to Florida

The ur	ndersigned, FRENCH	HY ROY	PRESIDENT		
		(Name)	(Title)		
of R	OY, INC.	, a foreign			
•	ration, in accordance with stication.	s. 607.11922, Florid	a Statutes, submit these Articles of		
	Then name of the domes	sticating corporation	is YOUR PERMIT SOLUTION, INC.		
	(ROY, INC) CF	ROSS REF	(Foreign Corporation)		
2.	The jurisdiction and date of its formation is 12/12/2007				
3.	3. The name of the domesticated corporation is YOUR PERMIT SOLUTION, INC.				
4.	The jurisdiction of forma	tion of the domestic	ated corporation is Florida		
5.	The domestication corporation is a foreign corporation and the domestication was approved in accordance with its organic law. Attached are Florida Articles of Incorporation to complete the domestication				
6.	Attached are Florida Articles of Incorporation to complete the domestication requirements pursuant to s.607.0202, F.S.				
l certif	y I am authorized to sign	these Articles of Don	nestication on behalf of the corporation	<u> </u>	
		/ (Author	ized Signature)		

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

THE NAME OF THE CORPORATION SHALL BE:			
VOUR REPAIT SQUITTON INC			
YOUR PERMIT SOLUTION, INC.			
ARTICLE II PRINCIPAL OFFICE			
THE PRINCIPAL PLACE OF BUSINESS/ MAILING A	ADDRESS IS:		
Principal Address	Mailing Address		
3440 HOLLYWOOD BLVD., STE 415 HOLLYWOOD, FL 33021	3440 HOLLYWOOD BLVD , STE 415 HOLLYWOOD, FL 33021		
ARTICLE III PURPOSE THE PURPOSE FOR WHICH THE CORPORATION PROFESSIONAL SERVICES AND CONSULTING		2.	2024 448 11
PROFESSIONAL SERVICES AND CONSCENING			=
			- 7 -
ARTICLE IV SHARES		٠٥٠	
THE NUMBER OF SHARES OF STOCK IS: 100		-	3
ARTICLE VI REGISTERED AG	ENT AND STREET ADDRESS	- • :	
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTER	RED AGEN	T IS:
FRENCHY ROY			
1721 SE 17TH ST #704			
FT. LAUDERDALE, FL 33316			
HAVING BEEN NAMED AS REGISTERED AGE	ENT AND TO ACCEPT SERVICE OF PROCESS	FOR THI	E
ABOVE STATED CORPORATION AT THE PLACE			
WITH AND ACCEPT THE APPOINTMENT AS R	•		
CAPACITY.			
	03/24/23		
Signature/Registered Agent	Date		

ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

FRENCHY ROY & PRESIDENT Name & Title: Name & Title: ______ 3440 HOLLYWOOD BLVD., STE 415 Address: Address: HOLLYWOOD, FL 33021 Name & Title: Name & Title: Address: Address: Name & Title: Name & Title: Address: Address: Name & Title: Name & Title: Address: Address: I submit this document and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 8.817.155.F.S. 03/24/23 Signature/Authorized Person