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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA00000023
Phone : (614)280-3338
Fax Number : (614)573-3996

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

Email Address: paige.goulden@dentons.com

2024-03-26 AM 9:43

Case: 121-35

**FLORIDA PROFIT/NON PROFIT CORPORATION
TRIPHOUZ DIGITAL MEDIA, INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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

ARTICLE I NAME

The name of the corporation shall be: Triphouz Digital Media, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
7901 4th Street N.
Suite 300
St. Petersburg, FL 33702

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any lawful purpose.

ARTICLE IV SHARES

The number of shares of stock is: 100,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Robert Bartram, President & CEO</u>	Name and Title:	<u>Robert Bartram, Director</u>
Address	<u>7901 4th Street N.</u>	Address:	<u>7901 4th Street N.</u>
	<u>Suite 300</u>		<u>Suite 300</u>
	<u>St. Petersburg, FL 33702</u>		<u>St. Petersburg, FL 33702</u>
Name and Title:	<u>Kim Andres Yanez Sepulveda, VP & Sec'y</u>	Name and Title:	<u>Kim Andres Yanez Sepulveda, Director</u>
Address	<u>7901 4th Street N.</u>	Address:	<u>7901 4th Street N.</u>
	<u>Suite 300</u>		<u>Suite 300</u>
	<u>St. Petersburg, FL 33702</u>		<u>St. Petersburg, FL 33702</u>
Name and Title:	<u>Roger Millad, Treasurer</u>	Name and Title:	<u>Roger Millad, Director</u>
Address	<u>7901 4th Street N.</u>	Address:	<u>7901 4th Street N.</u>
	<u>Suite 300</u>		<u>Suite 300</u>
	<u>St. Petersburg, FL 33702</u>		<u>St. Petersburg, FL 33702</u>

To:

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2024-03-25 14:08:07 PDT

19548277645

From: Keity Toon

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: C T Corporation System
Address: 1200 South Pine Island Road Plantation,
FL 33324

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Christopher Tillson
Address: 1 Alhambra Plaza Penthouse
Miami, Florida 33134

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.

C T Corporation System
By: *Keityn A. Waddou, Art Secretary* 3/25/24
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.

/s/ Christopher Tillson 03/25/2024
Required Signature/Incorporator Date

2024
3/25/2024
12:30