## Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA PROFIT/NON PROFIT CORPORATION IN-CREDIBLE INC.

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Help

70:-

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

ARTICLET NAME The name of the corpora	tion shall be:		
ARTICLE II PRINCIPAL OFFICE  Principal street address 1001 COASTAL BAY BLVD.		Mailing address, if different is: 1001 COASTAL BAY BLVD.	
BOYNTON BEACH, F	L. 33435	BOYNTON BEACH, FL. 33435	
	he corporation is organized is:	any lawful act or activity	for
which corporations may			a <del>and</del> a magain and a substitution of the sub
			**************************************
			702 SALGO
		• • • • • • • • • • • • • • • • • • •	FIL MAY - I CRETARY AHASSEI
ARTICLE IV SHARI The number of shares of			, ; ; ; <b>/~~~</b>
ARTICLE V INITIA	L OFFICERS AND/OR DIRECTORS		ED PHIZ: 13 PF STATE OF FLORID.
Name and Title	1001 COASTAL BAY BLVD	Name and Title:	
Address	BOYNTON BEACH, FL. 33435	Address:	
Name and Title:		Name and Title:	
Address		1.17	
		<u> </u>	
		Name and Title:	
Address		Address:	
		<del></del>	
· ·		· · · · · · · · · · · · · · · · · · ·	

From: Veronica Go

Name a	nd Title:	Name and Title:
Addres		Address:
	·	
ARTICLE VI	REGISTERED AGENT	
Name:	Florida street address (P.O. Box NOT acceptab THERESA MEYER-KURKA	le) of the registered agent is:
Address:	1001 COASTAL BAY BLVD.	<del></del>
	BOYNTON BEACH, FL. 33435	Mark Inc., class
ARTICLE VII	INCORPORATOR	
	ddress of the Incorporator is:	
Name:	THERESA MEYER-KURKA	
Address:	1001 COASTAL BAY BLVD.	
	BOYNTON BEACH, FL. 33435	
Effective date, if (If an effective days after the fi	ling.)	innot be more than five business days prior or 90 business
Note: If the date the document's e	e inserted in this block does not meet the applic effective date on the Department of State's reco	able statutory filing requirements, this date will not be listed as rds.
this certificate, I	am familiar with and accept the appointment a	ocess for the above stated corporation at the place designated is registered agent and agree to act in this capacity
	hen Man-k.h. / Required Signature/Registered Agent	5.1.24
	/ Required Signature/Registered Agent	5 · 1 · 2 · 9
I submit this doc		are true. I am aware that the false information submitted in
	ired Signature/Incorporator	5.1.24
Requi	red Signature/Incorporator	Date