

P24000031293

Florida Department of State  
Division of Corporations  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: harry@samuelsaccounting.com

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**KRONFLI GLOBAL CONSULTING INC**

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

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COMMERCIAL  
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**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: KRONFLI GLOBAL CONSULTING INC**ARTICLE II PRINCIPAL OFFICE**Principal street address2812 SEQUOYAH DRIVEHAINES CITY, FL 33844

Mailing address, if different is:

**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any Legal and Lawful Purpose**ARTICLE IV SHARES**The number of shares of stock is: 1,500 at No Par Value**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ANTHONY F KRONFLI - President/Director

Name and Title: \_\_\_\_\_

Address 5576 JAMES YOUNG WAY

Address: \_\_\_\_\_

FAIRFAX, VA 22032

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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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: Harry M. Samuels

Address: 2901 Stirling Road, #308

Ft. Lauderdale, FL 33312

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: ANTHONY F KRONFLI

Address: 5576 JAMES YOUNG WAY

FAIRFAX, VA 22032

**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*

Required Signature/Registered Agent Harry M. Samuels

*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.*

Required Signature/Incorporator ANTHONY F KRONFLI

May 6th, 2024

Date

May 6th, 2024

Date

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